



## **Historical Security Council**

### **Combating the Hepatitis epidemic, 1940s :**

First reported from Germany in 1942 and the Middle East  
in 1943

**Chairs:** Sirine Malak Dib and Sherine Belmaachi

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## Introduction:

Dear fellow TMUN delegates,

We, your fellow chairs for the *Historical Security Council* are, Sirine Malak Dib and Sherine Belmaachi ([sirine.dib@ast.ma](mailto:sirine.dib@ast.ma) and [sbelmaachi@gwacasablanca.com](mailto:sbelmaachi@gwacasablanca.com)). We would like to extend a warm welcome to you as a participant of the *Historical Security Council* committee. We will assist in keeping the MUN debates organized and allowing all delegates voices to facilitate

sharing ideas, while ensuring that all rules of procedure are followed. This year's 2022 TMUN conference will give you and your fellow delegates first hand exposure to see up close on the topic of Combating the Hepatitis Epidemic, 1940s: First reported from Germany in 1942 and the Middle East in 1943.

## **Introduction to the Committee;**

The UN (United Nation) Charter created the Historical Security Council, a perpetual institution whose only duty is to uphold global peace and security. As long as a resolution is adopted, the UNSC is the sole organization that has the authority to compel a country to do a certain action. In order to intensify its endeavors, the UNSC may also create subcommittees, and it may also request inspections of fact-finding delegations. The subcommittee of the UNSC is the *Historical Security Council*, similar to how the Security Council works, the Historical Committee will discuss historical differences as they arise rather than discussing current ones. Our committee will be undertaking the current situation of Hepatitis, that was an epidemic in the 1940s, and still affecting today's nation.

## **Topic Introduction (Combating the Hepatitis epidemic,1940s):**

Viral hepatitis is a problem of international public health, comparable to that posed by other major diseases transmissible such as HIV, tuberculosis or malaria. Despite the heavy load that it weighs on the populations in all regions of the world, hepatitis was not really considered a priority for health and development until a recent date. Viral hepatitis will no longer be neglected

now with the adoption of the resolution of the Sustainable Development Program by 2030. The 2030 Agenda aims to create a safe world, free from poverty and hunger, with full and productive employment, access to quality education and universal health coverage.

Hepatitis is an inflammation of the liver caused by toxic substances, or by viruses (most cases). To date, 5 viruses causing targeted infection and inflammation of the liver have been identified. These viruses, designated by the letters A, B, C, D, and E, differ in their mode of transmission and their aggressiveness. Both Hepatitis A & E are food/waterborne infections that can result in widespread in societies with unclean water and poor hygiene. Unfortunately, Hepatitis A & E have no specific treatment and they do not result in chronic infection or liver disease. On the bright side however, prevention from this disease is relatively easier where improved sanitation, food safety and vaccination are the essential of the strategy. Unlike the previous two types, Hepatitis B, C and D are usually contracted via direct contact with blood, sexual contact and to babies from the mother either during pregnancy or birth. For these types of Hepatitis, prevention varies from:

- Washing hands thoroughly
- Avoid sharing sharp items (Needles, Razors, Toothbrushes...)
- Avoiding direct contact with infected blood and bodily fluids

For Hepatitis B prevention, vaccination remains the main preventive measure against it. A wide vaccination program will eventually result in the reduction of the number of chronic carriers of the B virus. Hepatitis A and B both target the liver, yet they are very different viruses. Since hepatitis B is a blood-borne infection, direct blood contact with an infected individual is the main

way it spreads. Hepatitis A, on the other hand, can be transferred through fecal-oral transmission or by ingesting infected food or drink. It is crucial to remember that casual contact, such as holding hands, eating a meal with, or consuming food made by, an exposed person, cannot cause hepatitis B. Plates and utensils don't need to be kept apart. However, eating food that has been prepared by an infected individual can result in the spread of hepatitis A. Inadequate personal hygiene and sanitation are the main causes of hepatitis A. Inadequate personal hygiene and sanitation are the main causes of hepatitis A. Lack of crucial infrastructure, such as waste management or clean water systems, can lead to poor sanitation and hygiene. Additionally, an inadequate education might also be the cause.

There is no doubt that some progress has been made over the last two decades, World Health Organization (WHO) chief Tedros Adhanom Ghebreyesus said that globally, “access to prevention, testing, and treatment services for viral hepatitis remains far too low”. He also added, “Over 350 million people have chronic hepatitis, an estimated 80 per cent of them can’t access the care they need”. According to a study by the WHO, accurate tests, medication, education campaigns and vaccination can prevent an estimated 4.5 million premature deaths in low/middle income countries by 2030. At this time, only 42% of children worldwide have access to the birth dose of the hepatitis B vaccine.

By 2030 the WHO’s global hepatitis strategy, which was backed by all WHO member countries, aims to “Reduce new hepatitis B and C infections by 90% and deaths by 65%” as indicated by the WHO chief. He added also “We have the tools to reach these targets, but only if all countries

commit to making sure all people have access to them”. “Let’s get to work because hepatitis can’t wait”.

### **Questions to consider:**

1. What are the chances of contracting hepatitis from a blood transfusion?
2. What is the difference between HAV, HBV and HCV?
3. What are the chances that hepatitis is infectious during medical or dental procedures?
4. What are the risks of hepatitis outbreaks occurring in health care facilities, and what new developments have been made to those facilities in each country to aid in the fight against hepatitis?
5. Hepatitis had a significant impact on Scotland during the 1940s; what are some government regulations or procedures that countries have put in place to stop the spread of Hepatitis?
6. In what ways are countries assisting developing countries such as the South Pacific region and Africa in combating Hepatitis?
7. What are some campaigns that have begun in countries to combat hepatitis and help reduce the hepatitis occurrence?
8. What is the difference between hepatitis A and Hepatitis B?

### **Key Words:**

- **Hepatitis:** the inflammation of the liver, which hinders its functions such as infection fighting.
- **Necroinflammation:** describes an auto-amplification loop triggered by necrosis (cell death) and inflammation.
- **Fibrosis :** Tissue thickening or scarring (happens to the liver).
- **Cirrhosis :** Long-term liver damage causes scarring (fibrosis) of the liver.
- **Hepatocellular Carcinoma :** A form of liver cancer that can be caused by hepatitis
- **HAV:** Hepatitis A is a liver inflammation that can cause mild to severe illness.
- **HBV:** Hepatitis B is transmitted when body fluids from an infected person enter the body of an uninfected person.

- **HCV:** Hepatitis C is spread through direct contact with infected blood.
- **Epidemic:** an outbreak of an infectious disease in an area at a specific time
- **FDA:** U.S. Food and Drug Administration
- **WHO:** World Health Organization

## **Requirements:**

- A. Must be well-versed in the topic.
  - a. Knowledge of your country and other countries relevant to the topic.
- B. A position paper on the topic (approximately 1 page and should contain topics and issues your country has about the topic).
- C. Resolution paper with potential solutions to the problem (needs to be approximately 1 page).

## **Resources:**

- [Part 1 of how to write a position paper.](#)
- [Part 2 of how to write a position paper.](#)
- [How to write a winning position paper.](#)
- [How to write a resolution paper.](#)

## **Note:**

Delegates, please begin working on your position papers as soon as possible because they are due on November 29th, 2022. We will review them and provide feedback after you submit them. It should be noted that each country may have different regulations and procedures in place to combat Hepatitis. We have outlined the requirements for representing your country; please follow them. If you have any concerns or questions, please email us at [sirine.dib@ast.ma](mailto:sirine.dib@ast.ma) or [sbelmaachi@gwacasablanca.com](mailto:sbelmaachi@gwacasablanca.com). We are looking forward to meeting everyone at the conference and hope to see you there ready to participate in the discussions.

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