

Responses to Infectious Disease Outbreaks in Refugee Camps and Displacement Zones

Committee: World Health Organization (WHO)

Conference: FISDMUN II

Co-Chair: TBD

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Committee Overview

The [World Health Organization \(WHO\)](#) is the leading global authority on public health, responsible for coordinating international responses to health emergencies and promoting equitable access to care. In the context of migration and displacement, the WHO plays a critical role in addressing the health needs of refugees and migrants, particularly in high-risk environments such as refugee camps and informal settlements.

This committee will focus on preventing and responding to infectious disease outbreaks in refugee and migrant populations, with an emphasis on improving healthcare delivery and enhancing international coordination. Delegates will explore both short-term emergency responses and long-term health system integration, while balancing public health priorities with resource constraints and political realities.

Introduction

The World Health Organization identifies refugee and migrant health as a growing global concern, particularly as displacement reaches unprecedented levels. Refugee camps, often characterized by inadequate sanitation and limited healthcare infrastructure, create conditions where infectious diseases can spread rapidly.

Between 2009 and 2017, frequent outbreaks of diseases such as measles, cholera, and meningitis were recorded in refugee settings, posing cross-border public health risks and requiring coordinated international action. At the same time, advancements in surveillance technologies and early warning systems have demonstrated that outbreaks can be predicted, detected, and contained more effectively than ever before. With armed conflicts occurring across the globe increasing the need for refugee camps and displacement zones, more action is needed to address the health concerns that come with large groups of people being in sudden proximity.

Topic Background

Infectious disease outbreaks in refugee and migrant populations are driven by a combination of environmental and systemic factors:

- **Overcrowding and sanitation challenges:** Refugee camps often experience extreme population density and inadequate sanitation systems. These conditions accelerate the transmission of communicable diseases, particularly waterborne and respiratory illnesses (Altare et al.).

- **Gaps in vaccination and preventative care:** Low immunization coverage has been identified as a major contributor to outbreaks. Preventable diseases such as measles continue to spread due to inconsistent vaccination campaigns and logistical challenges in displaced populations (Altare et al.).
- **Inadequate disease monitoring systems:** Delayed detection of outbreaks significantly increases their severity. Traditional surveillance systems in refugee settings are often under-resourced, leading to slower responses and higher mortality rates (Blundell et al.).
- **Barriers to Healthcare Access:** Refugees and migrants frequently face legal, financial, and social barriers to accessing healthcare. These include lack of documentation, limited integration into national health systems, underfunded host country infrastructure, and/or racism/xenophobia in their host country (World Health Organization, Refugee and Migrant Health).

Past UN and International Actions

The international community, led by the World Health Organization, has implemented several initiatives to address health challenges in refugee and migrant populations:

- **WHO Refugee and Migrant Health Framework (2022):** Promotes equitable access to healthcare and integration of refugees into national health systems (World Health Organization, Refugee and Migrant Health).
- **EWARS (Early Warning, Alert, and Response System):** A surveillance system designed to detect and respond to disease outbreaks in emergency settings (Ngwabe Che).
- **Go.Data Platform:** A digital tool used for outbreak investigation and contact tracing, successfully implemented in large refugee settings (World, *From Data to Life-Saving Action*).

Despite these efforts, challenges remain in implementation, funding, and coordination across multiple actors, including governments, NGOs, and international organizations.

Case Studies

1. **Cox's Bazar, Bangladesh, and the Rohingya Refugee Camps:** One of the largest refugee settlements in the world, Cox's Bazar has faced repeated disease outbreaks due to overcrowding and limited resources. The implementation of Go.Data significantly improved outbreak response by enhancing contact tracing and coordination, demonstrating the effectiveness of digital health tools in complex humanitarian settings (World, *From Data to Life-Saving Action*).
2. **Global Refugee Camps (2009–2017) Infectious Disease Trends:** Analysis of UNHCR data revealed recurring outbreaks of measles, cholera, and meningitis across multiple refugee settings. These outbreaks were often linked to preventable factors such as low vaccination rates and inadequate sanitation, highlighting systemic weaknesses in health infrastructure (Altare et al.).
3. **Bangladesh and EWARS Implementation:** The deployment of EWARS in refugee camps enabled faster detection of disease outbreaks, allowing for more rapid responses and reduced mortality rates. This case underscores the importance of early warning systems in saving lives (Ngwabe Che).

Policy Recommendations

Delegates should consider the following strategies and others when drafting resolutions:

1. **Strengthening Disease Surveillance Systems:** Expand tools like EWARS and digital platforms for real-time outbreak monitoring.
2. **Enhancing Healthcare Infrastructure:** Invest in water, sanitation, and healthcare facilities in refugee settings.
3. **Improving International Coordination:** Strengthen collaboration between governments, NGOs, and international organizations.

Questions to Consider

- How can early warning systems be expanded and funded in resource-limited refugee settings?
- What role should technology play in disease surveillance while addressing data privacy concerns?
- How can countries balance emergency outbreak response with long-term health system integration?
- What responsibilities do host countries and the international community share in ensuring refugee health?
- How can barriers to healthcare access for undocumented migrants be addressed?

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