



WHO

World Health Organisation

Study Guide



AGENDA

Regulating the consumption of processed food with emphasis on preserving adolescents' physical and mental health.

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COMMITTEE INFORMATION

The WHO, a United Nations agency established in 1948, leads global health efforts. Its mission is to ensure everyone worldwide enjoys the highest attainable standard of health. This endeavor involves combating infectious diseases like COVID-19 and Ebola, fostering healthier lives through initiatives like vaccination and nutrition programs, and tackling pressing global health issues such as climate change and antibiotic resistance. The WHO serves as a vital coordinator in international health emergencies.

WHO develops evidence-informed guidance on improving the food environment, such as school food and nutrition policies, public food procurement policies, nutrition labelling policies, policies to restricting marketing foods and beverages to children, and fiscal policies (i.e., taxation and subsidies). WHO engages with food manufacturers on improving the nutrition profile of their products.

INTRODUCTION TO THE AGENDA

Due to our ever growing populations and the increase in the cost of living, making sure everyone is at the best health attainable was always going to be a challenge. With the increase in consumption of UPFs (Ultra Processed Foods) we must face such challenges by strengthening global cooperation to prevent the deterioration of people's physical and mental health.

Global Cooperation

Global cooperation means collaborative efforts between countries to address shared challenges like climate change and pandemics. This includes diplomatic agreements, joint research, and resource sharing.

Unfortunately, several factors hinder global healthcare collaboration. Political instability, economic disparities, and data privacy concerns pose significant challenges. Mistrust between nations, particularly regarding intellectual property and resource sharing, further complicates cooperation. Cultural and linguistic barriers, along with inconsistent healthcare practices across countries, create obstacles in coordinating initiatives. Addressing these limitations requires an effective approach that promotes building trust, promoting equitable resource distribution, strengthening data security measures, and fostering open communication and collaboration among nations.

History of Processed Foods

During World War II, military needs spurred significant innovation in the production and distribution of processed foods, greatly increasing the ease of transport and shelf life of food products and ultimately leading to

widespread availability of canned and packaged goods. As a result, following the war, highly processed foods became common, particularly in American diets. In the 1980s the term ultra-processed food was introduced, being used in reference to a growing contingent of convenience foods and snacks.

Since the late 20th century, UPFs have become increasingly prevalent worldwide. Roughly half the total dietary energy consumed in high-income countries, such as Canada, the United States, and the United Kingdom comes from UPFs. In middle-income countries, such as Brazil, Chile, and Mexico, between one-fifth and nearly one-third of total dietary energy is from UPF consumption.

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Some studies also suggest that UPFs have an impact on mental health. Their findings suggest that greater UPF intake, particularly artificial sweeteners and artificially sweetened beverages, is associated with increased risk of Depression.

Responses to health effects of processed food

In response to negative health impacts, many countries, states, and municipalities have taken steps to discourage UPF consumption. Examples include the introduction of excise taxes on unhealthy beverage and food products and mandates for front-of-package warning labels to identify high-calorie UPFs.

Health Effects

The hyperpalatability and convenience of UPFs lend them to excess consumption. Overeating of such products results in excessive calorie intake, which negatively impacts health and can lead, in particular, to obesity and metabolic disturbances. Excess salt intake from UPFs can further contribute to hypertension, with increased risk of cardiovascular diseases such as stroke. High levels of trans fats and saturated fats in UPFs can also fuel elevations in levels of low-density lipoprotein cholesterol, which can have additional adverse effects on cardiovascular health.

Impact on adolescents' health

Among adolescents, the consumption of UPFs can cause developmental delays and excessive weight which can pose serious and unresolved challenges. These conditions are often linked to poor nutrition and can lead to long-term health problems, including increased vulnerability to disease, hindered growth, and difficulties in cognitive and emotional development. Obesity, in particular, has become a widespread concern that affects young people across all countries and social groups, influencing both their physical health and psychological well-being.

Research studies have found that when children eat more ultra- processed foods, they may have more trouble learning. And they're more likely to have attention deficit-hyperactivity disorder (ADHD), depression, and behavior disorders. The consumption of UPFs during pregnancy can also affect an adolescent's learning as they grow up.

LIMITING FACTORS

Despite the success of some policies, progress remains slow due to several limiting factors. The influence of large multinational food corporations is a major barrier. Many of these companies lobby against regulations or fund misleading research to downplay the risks associated with their products. Economic inequality also plays a role; healthy foods are often more expensive or less accessible than processed alternatives, particularly in developing countries.

Lack of awareness and education is another problem. Many consumers do not fully understand nutrition labels or underestimate the long-term impact of their dietary choices. Cultural preferences and habits can make change difficult, while inconsistent international regulations make global cooperation challenging. Finally, in many low- and middle-income countries, reliable research on dietary health is limited, making it harder to design evidence- based policies.




QARMA - Questions a Resolution Must Answer

1. How can we make food labeling more transparent and informative
2. How can governments tackle economic issues such as the increased cost of non- processed foods
3. How can we educate the general public on the harmful effects of UPFs
4. How can we do to collect reliable data on food consumption and its outcomes in developing countries

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SUGGESTED MODERATED CAUCUS TOPICS

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1. Decreasing global inequality in access to nutritious foods.
 2. The role of large corporations in the promotion of UPFs to adolescents.
 3. Improving food labeling and consumer awareness
 4. The role of schools and education in promoting healthier diets

PRO TIPS

1. Go beyond the study guide while researching about the agenda, and ensure that you are thorough with your portfolios' stance about the same, and various sub-topics thoroughly.
2. Ensure that all sources of information you use in your speeches are reliable, and accepted in MUNs. The executive board and/or other delegates may ask for a source, with regard to a piece of information that you provide. Some reliable sources include UN affiliated websites, BBC, The World Bank. (Don't limit yourself to just these!)
3. Use facts and statistics to make your speech more reliable and make your argument stronger
4. Be prepared with at least 2 GSL's, and 4 moderated caucus speeches.

BIBLIOGRAPHY AND FURTHER READING LINKS

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<https://www.frontiersin.org/journals/nutrition/articles/10.3389/fnut.2024.1489067/full>

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