



Navigating Change: Building Stability in an Unpredictable World

WORLD HEALTH ORGANIZATION: Topic 1

PROVIDING HEALTHCARE IN REMOTE AND CRISIS-AFFECTED AREAS

Background:

The challenge of providing healthcare in remote and crisis-affected areas is a complex and multifaceted issue. These regions, often characterized by geographic isolation, socio-economic barriers, and political instability, present significant hurdles to establishing and maintaining effective healthcare systems.

A crisis-affected area is a geographical location where a humanitarian crisis has occurred, causing severe damage to infrastructure and threatening the health, well-being, and safety of the population by depriving them of basic needs like food, water, shelter, and healthcare. These areas are often impacted by events such as natural disasters, civil wars, or epidemics¹ Currently, almost a quarter of the global population reside in settings affected by conflict or natural disaster. The disturbances in healthcare become difficult to access and receive due to infrastructure damage, healthcare worker shortage, insecurity, violence, financial constraints, and the weaponization of healthcare².

A rural area is a geographical region situated outside of cities and towns. These areas are often characterized by low population density and dispersed settlements. Rural regions usually include villages, farmlands, and forest³. About half of the world's population live in remote areas, and these populations often live in poverty, with “two out of three people living in extreme poverty live in rural settings. In total, some 400 million rural men and women live in extreme poverty, more than the populations of the United States and Canada combined.⁴”. Rural areas tend to have longer distances to access healthcare services, as well as a lack of

¹ “Humanitarian Crises,” Malteser International, accessed September 6, 2025, <https://www.malteser-international.org/en/current-issues/humanitarian-crises.html>.

² Joe Jubb, “Under Threat: Healthcare in Conflict Zones,” The Health Policy Partnership, August 13, 2021, <https://www.healthpolicypartnership.com/under-threat-healthcare-in-conflict-zones/>.

³ “Rural Area,” accessed September 6, 2025, <https://education.nationalgeographic.org/resource/rural-area/>.

⁴ Baldwin Tong et al., “To Move the Needle on Ending Extreme Poverty, Focus on Rural Areas,” *Brookings*, February 21, 2020, <https://www.brookings.edu/articles/to-move-the-needle-on-ending-extreme-poverty-focus-on-rural-areas/>.



infrastructure and reliable transportation⁵. Because of these barriers “The patient-to- primary care physician ratio in rural areas is only 39.8 physicians per 100,000 people, compared to 53.3 physicians per 100,000 in urban areas.⁶”

Current Situation:

In various conflict zones around the world, there are severe shortages of healthcare resources and a deliberate strategy to use healthcare as a weapon of war. These actions have devastating consequences for civilian populations and violate international humanitarian law.

For instance, in Ukraine since 2022, 42% of all attacks have targeted healthcare services, with a total of 1762 attacks on healthcare facilities⁷. Similarly, in Gaza, there have been at least 136 strikes on at least 27 hospitals and 12 other medical facilities⁸. The destruction of infrastructure is particularly acute in Syria, where 57 percent of public hospitals have been damaged while 37 percent are no longer functioning, contributing to a tragic toll of 70,000 deaths from a lack of adequate health services and medicines, especially for chronic diseases⁹. The situation is similarly dire in Sudan, where intense fighting and violence have left over 11 million people in need of urgent health care. There, two-thirds of all main hospitals in affected areas are out of service, with the remaining functioning facilities at risk of closure due to shortages of medical staff, supplies, safe water, and electricity¹⁰.

These statistics are not merely numbers; they represent a systematic strategy to weaponize healthcare, deliberately targeting the very institutions meant to provide relief. This makes it incredibly difficult for those in dire need of care to receive it, as hospitals are destroyed, and medical professionals are unable to operate safely, ultimately turning the fundamental human right to health into a casualty of war.

Moving from crisis areas to rural settings, a similar narrative of healthcare disparity unfolds. In India, public health spending is minimal and is mostly directed toward urban regions, even

⁵ “Healthcare Access in Rural Communities Overview,” Rural Health Information Hub, accessed September 6, 2025, <https://www.ruralhealthinfo.org/topics/healthcare-access#barriers>.

⁶ “NRHA’s Rural Health Voices Blog,” National Rural Health Association, accessed September 6, 2025, <https://www.ruralhealth.us/blogs/2024/09/bridging-the-gap-addressing-health-inequities-in-rural-communities>.

⁷ Accessed September 6, 2025, <https://reliefweb.int/report/ukraine/1762-attacks-health-care-over-three-years-russia-escalates-its-war-ukraines-doctors-and-hospitals-phr>.

⁸ “Israel Attacks Push Gaza Healthcare ‘to Brink of Collapse,’” UN News, December 31, 2024, <https://news.un.org/en/story/2024/12/1158646>.

⁹ Omer Karasapan, “The War on Syria’s Health System,” *Brookings*, February 23, 2016, <https://www.brookings.edu/articles/the-war-on-syrias-health-system/>.

¹⁰ “Sudan Emergency,” accessed September 6, 2025, <https://www.who.int/emergencies/situations/sudan-emergency>.



though the majority of the population resides in rural areas. There is a widespread shortage of healthcare workers, which is especially severe in the countryside, while approximately 75% of health infrastructure and resources are located in cities, which house only about 27% of the population. Around 86% of medical visits are made by people from rural areas, with many traveling over 100 km to find a healthcare facility¹¹. Similarly, sub-Saharan Africa has significantly fewer health workers than recommended by the WHO, with only 1.3 per 1,000 people compared to the recommended 4.5. The region shoulders 24% of the world's disease burden but has only 3% of the global health workforce. Access to safe surgery is available to just 5% of Africans, and the continent needs nearly 50 times the current number of surgical workers¹². In America, rural communities face a notable lack of healthcare providers, with only 68 physicians per 100,000 people, compared to 80 in urban areas. The closure of rural hospitals creates "health care deserts" and also damages the local economy, as hospitals are often one of the largest employers in these communities¹³.

Ultimately, a persistent lack of funding, personnel, and infrastructure plagues rural areas across the globe, forcing residents to contend with significant barriers to care.

Important bloc positions:

- *G7 Nations and the European Union (EU)*: These groups are aiming towards a cooperative approach to healthcare. They want to focus on helping countries develop stronger local health systems by using new technology in order to reach populations in remote areas¹⁴ ¹⁵. These countries have also allocated funds for humanitarian aid and believe medical workers should be protected in conflict zones¹⁶.
- *China*: Through the country's initiative: "Health Silk Road", China's approach is to work directly through countries avoiding big international groups. They aim to construct new

¹¹ Jacob Player, "Healthcare Access in Rural Communities in India," *Ballard Brief*, December 19, 2019, <https://ballardbrief.byu.edu/issue-briefs/healthcare-access-in-rural-communities-in-india>.

¹² Ray Harris, "The Healthcare Crisis in Sub-Saharan Africa: ," African Mission Healthcare, August 10, 2024, <https://africanmissionhealthcare.org/the-healthcare-crisis-in-sub-saharan-africa/>.

¹³ "NRHA's Rural Health Voices Blog," National Rural Health Association, accessed September 6, 2025, <https://www.ruralhealth.us/blogs/2024/09/bridging-the-gap-addressing-health-inequities-in-rural-communities>.

¹⁴ "EU Global Health Strategy," NFP4Health, accessed September 7, 2025, <https://www.nfp4health.eu/synergies/other-eu-initiatives/eu-global-health-strategy/>.

¹⁵ G7 Italy, "G7 Health Ministers' Communiqué," *G7 Italia*, October 10, 2024.

¹⁶ Refworld - UNHCR's Global Law and Policy Database, "Security Council Resolution 2286 (2016) [on Protection of the Wounded and Sick, Medical Personnel and Humanitarian Personnel in Armed Conflict]," Refworld, November 4, 2023, <https://www.refworld.org/legal/resolution/unsc/2016/en/110092>.



hospitals and clinics as well as sending in medical equipment backed up by technology to be able to aid individuals in remote or conflict-affected areas¹⁷.

- *African Union (AU)*: The AU's objective is to work together as a region to mitigate Africa's health care issues. They want to focus on and strengthen groups like the Africa Centers for Disease Control and Prevention (Africa CDC). Furthermore they are encouraging African countries to allocate more funds towards their healthcare so as to not rely on international aid¹⁸.

Possible solutions:

- Establish mobile clinics and outreach programs
 - Deploy healthcare professionals to remote villages and temporary settlements
 - Equip vehicles with medical supplies and basic diagnostic tools
- Implement telemedicine and remote consultation services
 - Utilize satellite internet and mobile networks to connect with distant patients
 - Train local community health workers to use telemedicine equipment
- Develop sustainable and resilient local healthcare infrastructure
 - Build small, self-sufficient clinics powered by renewable energy
 - Train and empower local community members as healthcare providers
- Coordinate with humanitarian organizations to ensure a swift and effective response
 - Create pre-approved emergency response plans
 - Stockpile essential medical supplies and medicines in strategic locations

Further reading:

- **[Health care in remote areas - Improving global health care - 3rd level Geography Revision - BBC Bitesize](#)**
- **[How to Improve Health Care in Rural Areas](#)**
- **[Medicine Under Attack: the increasing assault on healthcare in conflict zones - British Medical Association](#)**
- **[Medical Aid & Health Care in Conflict Zones | Doctors Without Borders](#)**
- **[Health Innovation In Conflict Zones - Catsol Healthcare Staffing](#)**
- **[How America is failing its rural hospitals](#)**
- **[Bringing healthcare to remote areas](#)**

¹⁷ Kirk Lancaster, "Mapping China's Health Silk Road," Council on Foreign Relations, April 10, 2020, <https://www.cfr.org/blog/mapping-chinas-health-silk-road>.

¹⁸ "Promoting Health & Nutrition," African Union, accessed September 7, 2025, <https://au.int/en/promoting-health-nutrition>.

**Bibliography:**

“Accessing Essential Health Services in Fragile, Conflict-Affected and Vulnerable Settings.”

Accessed September 6, 2025.

<https://www.who.int/activities/accessing-essential-health-services-in-fragile-conflict-affected-and-vulnerable-settings>.

African Union. “Promoting Health & Nutrition.” Accessed September 7, 2025.

<https://au.int/en/promoting-health-nutrition>.

Harris, Ray. “The Healthcare Crisis in Sub-Saharan Africa: .” African Mission Healthcare, August 10, 2024.

<https://africanmissionhealthcare.org/the-healthcare-crisis-in-sub-saharan-africa/>.

Italy, G7. “G7 Health Ministers’ Communiqué.” *G7 Italia* , October 10, 2024.

Jubb, Joe. “Under Threat: Healthcare in Conflict Zones.” The Health Policy Partnership, August 13, 2021.

<https://www.healthpolicypartnership.com/under-threat-healthcare-in-conflict-zones/>.

Karasapan, Omer. “The War on Syria’s Health System.” *Brookings*, February 23, 2016.

<https://www.brookings.edu/articles/the-war-on-syrias-health-system/>.

Lancaster, Kirk. “Mapping China’s Health Silk Road.” Council on Foreign Relations, April 10, 2020.

<https://www.cfr.org/blog/mapping-chinas-health-silk-road>.

Law, Refworld - UNHCR’s Global, and Policy Database. “Security Council Resolution 2286 (2016) [on Protection of the Wounded and Sick, Medical Personnel and Humanitarian Personnel in Armed Conflict].” Refworld, November 4, 2023.

<https://www.refworld.org/legal/resolution/unsc/2016/en/110092>.

Malteser International. “Humanitarian Crises.” Accessed September 6, 2025.

<https://www.malteser-international.org/en/current-issues/humanitarian-crises.html>

National Rural Health Association. “About Rural Health Care.” Accessed September 6, 2025.

<https://www.ruralhealth.us/about-us/about-rural-health-care>.

National Rural Health Association. “NRHA’s Rural Health Voices Blog.” Accessed September 6, 2025.



<https://www.ruralhealth.us/blogs/2024/09/bridging-the-gap-addressing-health-inequities-in-rural-communities>.

NFP4Health. "EU Global Health Strategy." Accessed September 7, 2025.

<https://www.nfp4health.eu/synergies/other-eu-initiatives/eu-global-health-strategy/>.

Player, Jacob. "Healthcare Access in Rural Communities in India." *Ballard Brief*, December 19, 2019.

<https://ballardbrief.byu.edu/issue-briefs/healthcare-access-in-rural-communities-in-india>.

"Rural Area." Accessed September 6, 2025.

<https://education.nationalgeographic.org/resource/rural-area/>.

Rural Health Information Hub. "Healthcare Access in Rural Communities Overview." Accessed September 6, 2025. <https://www.ruralhealthinfo.org/topics/healthcare-access#barriers>.

"Sudan Emergency." Accessed September 6, 2025.

<https://www.who.int/emergencies/situations/sudan-emergency>.

Tong, Baldwin, Constanza Di Nucci, Homi Kharas, and Kristofer Hamel. "To Move the Needle on Ending Extreme Poverty, Focus on Rural Areas." *Brookings*, February 21, 2020.

<https://www.brookings.edu/articles/to-move-the-needle-on-ending-extreme-poverty-focus-on-rural-areas/>.

UN News. "Israel Attacks Push Gaza Healthcare 'to Brink of Collapse,'" December 31, 2024.

<https://news.un.org/en/story/2024/12/1158646>.

World Health Organization: WHO. "Grim Milestone on World Humanitarian Day: WHO Records 1940 Attacks on Health Care in Ukraine since Start of Full-Scale War." *World Health Organization: WHO*, August 19, 2024.

<https://www.who.int/europe/news/item/19-08-2024-grim-milestone-on-world-humanitarian-day--who-records-1940-attacks-on-health-care-in-ukraine-since-start-of-full-scale-war>.

Accessed September 6, 2025.

<https://reliefweb.int/report/ukraine/1762-attacks-health-care-over-three-years-russia-escalates-its-war-ukraines-doctors-and-hospitals-phr>.



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