

The United Nations Children's Fund (UNICEF)



Topic A: Child Malnutrition

Topic B: Anti-Vaccination and Children's Health

Director: Teia Poblete

POSITION PAPERS DUE on October 17th by 11:59 pm to Committee Email

October 24-25, 2020

To Delegates of CHSMUN Advanced 2020

Dear Delegates,
Welcome to CHSMUN Advanced 2020!

It is our highest honor and pleasure to welcome you all to our 2020 online advanced conference here at Cerritos High School. On behalf of the Cerritos High School Model United Nations program, we are proud to host our very first advanced conference, where you will become more knowledgeable on international issues, participate in intellectually stimulating discussions, and create new and everlasting friendships.

The CHSMUN program continues to compete around the world as a nationally ranked MUN program. Our delegates utilize diplomacy in order to create complex solutions towards multilateral issues in the global community. Our head chairs are selected from only the best seniors of our program, undergoing a rigorous training process to ensure the highest quality of moderating and grading of debate. Furthermore, all the topic synopses have been reviewed and edited numerous times. We strongly believe that by providing each and every delegate with the necessary tools and understanding, he or she will have everything they need to thrive in all aspects of the committee. We thoroughly encourage each delegate to engage in all of the facets of their topic, in order to grow in their skills as a delegate and develop a greater knowledge of the world around them.

Although this wasn't what we expected, our advisors and staff have put in countless hours to ensure delegates have an amazing experience at the online conference. Our greatest hope is that from attending CHSMUN 2020, students are encouraged to continue on in Model United Nations and nevertheless, inspired to spark change in their surrounding communities. With this strong circuit consisting of 6 schools and over 500 delegates, CHSMUN Advanced 2020 will provide a quality experience for intermediate delegates to enhance their speaking and delegating skills.

If you have any questions, comments, or concerns, please contact us! We look forward to seeing you at CHSMUN Advanced 2020!

Sincerely,

Anjali Mani and Karishma Patel

sg.cerritosmun@gmail.com

Secretary-Generals

A Note From The Director

Delegates,

My name is Teia Malia Poblete and I am beyond excited to your head chair for UNICEF this year. I am currently a senior at Cerritos High School and this is my fourth year in MUN. Being in MUN has definitely been one of the major highlights throughout my high school years. The experience is eye-opening and allows our generation to be aware and involved in our international current events. I am confident that it allowed me to develop crucial traits within my character, which is why I am so excited to see all of you within our committee! Within my school, I do long jump for track and field, as well as am a part of our school's musical plays/productions. Additionally, I am President of American Red Cross, involved in You&Me, as well as, American Cancer Society. Besides school, I have gained passions in both painting and writing. I often write a lot about self-reflection or my opinion on political events. As for painting, although my paintings may often look like an elementary schooler did it, it's definitely been such an amazing creative outlet for me. In my free time, I love blasting Jhene Aiko, hanging out with my friends, and reading up on things such as current events, unsolved cases, etc. I am thrilled to see you all in the committee and am anticipating some amazing solutions/ideas!

Sincerely,

Teia Poblete

Unicef.CHSMUN@gmail.com

Director, UNICEF

Committee Introduction:

UNICEF, otherwise known as the United Nations Children's Fund, was created on December 11, 1946, to improve children's health after WWII. The main reason why the General Assembly mandated the United Nations was to ensure the advocate for the protection of children's rights, as well as to meet their basic needs. UNICEF prioritizes that the security, survival, and development of children are universal development imperatives that are crucial towards human progress. Throughout the various issues that affect children, such as those who are victims of war, disasters, extreme poverty, and the wide variety of forms of violence, the committee uses their actions to ensure their protection. Additionally, UNICEF has actively promoted equal rights of women and girls to be in support of their equal representation in government as well as their full participation in political, economic, and social issues. In order to achieve these goals, UNICEF works in over 190 countries to prioritize saving children's lives and defending their rights. An example of this is their crucial world reports, which include the State of the World's Children report, in which their research pinpoints and creates an understanding of the challenges children face in impoverished countries around the world. Additionally, UNICEF has their Annual Report, which highlights their main goals and the results of their solutions for helping children with education, basic human necessities, and their livelihood as a whole. Another essential role UNICEF has is its comprehensive strategies, which

are created to identify the specific problems and potential solutions for children throughout developing countries. For example, the Regional Humanitarian Strategy in the Middle East, which is used to strengthen the centrality of accountability for sexual exploitation and abuse of children. This strategy is used to scale up the amount of resource mobilization in order to attract flexible funding throughout that area. Overall, UNICEF ensures that the voices of children throughout the world are heard and creates several opportunities for the improvement of their protection.

Topic A: Child Malnutrition

Background:

Within a definition put out by WHO or the World Health Organization, a malnourished person is defined as someone who is lacking, have excessive, or imbalanced nutrients needed to keep their body alive. Malnutrition is primarily caused by the lack of proper nutrients within your organization, rather than the amount of food intake. Undernutrition, micro-nutrient related malnutrition, overweight or obesity, and diet-related non-communicable diseases are the four types of hunger someone can experience. Within undernutrition, there are sub-categories, with wasting and stunting being examples, that make the body all more vulnerable to such diseases as cancer and diabetes. Currently, more than 155 million children, only under the age of 5, are struggling with malnutrition worldwide. At a young age, children are needed to have extra care due to their developing, growing bodies in which they are more susceptible to undernutrition. With the leading causes of malnutrition stemming from poverty, food insecurity, and illiteracy, children struggle with this issue and experience the prevailing situation of not having any control of overcoming it. Lack of water, inadequate drinking water, and inefficient child care can result in a malnourished child that can result in infectious diseases. Improper hydration and sanitation can result in diarrhea, dysentery, and hepatitis A as well. Along with children, mothers are also more likely to gain undernutrition due to their duty of breastfeeding. Breastfeeding requires accumulating extra vitamins and nutrients to help support your child, and if malnourished, the baby will obtain these conditions too. Mental underdevelopment can be a result of undernutrition in which they will furthermore struggle in the future regarding schooling, jobs, and, ultimately, poverty. When a child struggles with malnutrition, they are more likely to struggle with schooling, economic stance, and survival. This issue allows for children to grow up being weaker, thinner, and smaller than their full potential. Not only does this affect them physically, but it also creates a slower maturity mentally with stunting in brain activity. Undernutrition is the most common type of malnutrition in which they are more susceptible to disease, blindness, and stunted growth. This is detrimental to the economy and workforce as well, especially with the high costs of resources for the incapable citizens, costing 3.5 trillion dollars per year. Africa is leading at the highest rates of malnutrition today at 53.6, according to the Global Hunger Index, with the following countries all being underdeveloped as well. Rural areas are more receptive to malnutrition due to the lack of healthcare, sanitation, and food within the area.

Transportation also provides a heavy impact on those within the region, for it prohibits access to food and water. Overpopulation is another major contributor to this issue in which underdeveloped countries tend to have small amounts of resources due to improper funds, hence the lack of support for their booming growth in population. War and conflict zones heavily impact those within underdeveloped regions because it ultimately results in bankruptcy, displaced peoples, and food crises. This creates a huge dent within a country's economy and allows for thousands of deaths to occur due to starvation. $\frac{2}{3}$ of those malnourished within rural countries originate from conflict zones, with a total of 112 million children. No access to such resources during a time of crisis can result in the dependency of humanitarian aid, which can also be unattainable as well. An example of this clearly takes place throughout Kashmir, a war filled region. With a lack of government supervision and extreme corruption, it led to their citizens becoming dependent on humanitarian aid. With a conflict between countries, many regions refuse or are denied the opportunity to supply food to help those within the region to survive. Along with war zones, natural occurrences of climate change can cause child malnutrition. Directly and indirectly, the climate can harm resources, jobs, and the economy. A drought can slow or even kill crop growth within farms, creating a lack of resource supply for those they support and depend on. An example of this is the increasing and extreme amount of desertification that has plagued Africa, leading to citizens having no sustainable source of food. Storms and tsunamis are also natural disasters that not only destroy homes, farms, and businesses but the economy by displacing large amounts of people at a time in which unemployment increases. As food insecurity and shortage increase, so does child malnutrition.

United Nations Involvement:

The United Nations has fully recognized that there are over 200 million children under the age of 5, which are either undernourished or overweight. Additionally, they have called for addressing the underlying factors such as weak learning, low immunity, premature death, and poor brain development. However, the UN has also acknowledged a key goal, which was to get children the right food to eat instead of prioritizing, giving them enough food to eat. In order to keep track of the regions that have higher numbers of malnourished youth, the UN has created the Joint child malnutrition estimates. This is used to allow for the regular updates for the joint global and regional estimates of child malnutrition. This is able to create statistics with over 95% confidence and compared differences throughout regions and countries. With this, the data can introduce and allow for countries to discuss possible solutions towards fixing or improving upon the diet of their people, specifically children. This data has shown to create interactive graphs, which monitor the percent of children stunted, the current wasting prevalence, and different trends. With this, countries can get a global overview and see how the chart moves over time—for instance, comparing from year to year to determine vulnerable regions and specific solutions. Throughout the years, the United Nations has heavily contributed their efforts in order to decrease the number of children malnourished internationally. The UN General Assembly created the Ending Child Hunger and Undernutrition Initiative in 2006 with the goal of creating strategic actions to help alleviate this issue. Furthermore, regarding breastfeeding, UNICEF

established a framework known as Childhood Malnutrition Prevention that helps support women within the first 1,000 days of pregnancy to help ensure full nutrition for their child. Focused primarily on rural areas, they fund 80% of the world's supply of "Ready-to-Use therapeutic miracle treatment" formulated with the proper vitamins needed to cure a child's malnutrition, with already helping 100 million children so far. Regarding action frameworks, WHO has also collaborated with the General Assembly to create the UN Decade of Action on Nutrition in 2016. This 10-year project focuses on set, determined goals that work with FAO, the World Food Programme, along with other organizations, in order to eliminate malnutrition effectively. This framework hopes to achieve its goal through summits, sustainable food systems, and strengthened governmental support. Already working in Italy, the US, and Norway, they are making major strides through international efforts to accomplish this. The United Nations has passed Resolution A/72/829, which focuses on the Decade of Action on Nutrition and the goal of connecting initiatives with governments and private-public partnerships. With the help of UN organizations, FAO, and WFP, they hope to strengthen the delegation and monitoring of the action plan. Resolution A/72/L.63 also works hand in hand with the Decade of Action, with its main goal of eradicating malnutrition by 2030. All goals are connected to the UN's Sustainable Development Goals (SDGs), in which two are being used for their efforts of ending poverty and malnutrition. OHCHR created the "Universal Declaration on the Eradication of Hunger and Malnutrition," Resolution 3180, with the General Assembly to help create ways, as an international community, we can resolve the food shortages in the world.

Case Study: The Eastern Cape, South Africa

South Africa is divided into 11 separate provinces, with the poorest being the Eastern Cape. However, it has the third-largest population in South Africa, with it taking up to 13.5%. Throughout the region, it is mostly dry throughout the west, with poor seasons for farming. Because of this, civilians have a heavy prevalence of under-nutrition. A particular area throughout Eastern Cape called Mount Frere is one of the most under-resourced regions of South Africa. The terrain is rugged with poor infrastructure throughout the area. With this, the climate is barely suitable for keeping livestock or growing a substantial amount of maize or vegetables. Widespread throughout this area are issues such as over-grazing and soil erosion. This has led to clear percentages of the stunted growth of children, with a study in 2013 indicating that 18% of children throughout the area are stunted. With these statistics, it is clear that children throughout the area highly struggle with other widespread diseases. For instance, with only 30% of households having toilet facilities, the region has a high percentage of those with diarrhea and other infectious diseases due to poor sanitation and inadequate provision of clean water. Additionally, there has been an increasing amount of HIV cases spread throughout the region. This has had a clear and destructive pattern as it increased the prevalence of under-nutrition and micronutrient deficiencies in children within the area. For example, over 50% of children that do end have HIV will end up becoming stunted or underweight. The result of this undernutrition is a vicious, common cycle that has to deal with issues such as poverty, inequality, food insecurity, undernutrition, and high rates of infection throughout the area. There have been several solutions

to potentially aid the area, with the most significant being the Child Support Grant. This grant was used as a means to allow their government to know the economic position of certain households. This allowed for particular families to apply for support from the government. With this grant, it is required that there must be proof of income, a South African identity document, marriage certificates, etc. With this, citizens throughout the region were proven to improve upon their lifestyle. It allowed for at least 7% of families to receive up to 240 Rand a year.

Bloc Positions:

Western: In the U.S., about 1% of children struggle with malnutrition, which comes to be about 12 million children within the nation. With more than 38 million people in poverty, the U.S. is implementing Federal Food Programs in hopes of closing that gap. No Kid Hungry, SNAP, and WIC are all programs that help families and children in need. In Europe, 33 million children struggle with malnutrition and working with the UN by contributing more than 5 million dollars to accomplish SDG 2 by 2030. Through collaborating with UN agencies, they aim to promote quality food production, better maternal practices, and reinforce production capacities. The 11th European development Fund was created to invest more than 156 million dollars into improving the efforts of malnutrition.

Latin America and Caribbean: Within the region, there are more than 4.8 million children under five currently stunted, with Guatemala struggling the worst out of the 18 countries within the region. They are currently addressing all forms of malnutrition through legislative policies guidelines by WHO's Comprehensive Implementation Plan on Maternal, Infant, and Young Child Nutrition (CIP). This framework is addressed in all 18 LAC countries' Constitutions but Chile's, yet they all support and have adopted ICESCR by the UN's General Assembly. LAC has instituted breastfeeding and micronutrient councils, along with implementing economic incentives for health foods in Chile, Colombia, Costa Rica, and Ecuador. Conditional cash transfer (CCT) programs have also been installed in order to reduce the prevalent booming of poverty within the area, social protection system surveillance, and nutrient-sensitive interventions within the region. *PROGRESA* in Mexico, *Bolsa Familia* in Brazil, and *Familias en Accion* in Colombia were successfully implemented with high national coverage for 2.6 million families.

African: Africa is currently the highest region struggling with malnutrition, being the number one cause of death, with more than 6 million children struggling today. West and Central Africa face issues due to land and crop degradation, periodic droughts, poverty, and rapid population growth, resulting in emergent levels of malnutrition. Republic of Congo, Guinea, Mali, and Niger have collaborated with the UN to launch UNIT LIFE, an innovative technology that allows industries to help supply resources for those struggling with malnutrition. Extraction of natural resources like oil and gas are helping contribute to the fund of improving nutrition within Africa. Although stunting affects 1 in every three children in Africa, they are heading closer to eliminating the issue with their financial fund supported by the UN.

Asian-Pacific: Currently, the Asian-Pacific region owns more than half a billion of the world's undernourished people. 77.2 million children under five are already experiencing stunting and are being burdened with diseases such as diabetes. The UN's FAO, WFP, UNICEF, and WHO are all putting in efforts with the Asian-Pacific region in order to combat malnutrition with legislative frameworks like the Regional Strategic Approach to Nutrition Programming. The UN states that in order to achieve the SDGs by 2030, more than 3 million people need to be lifted out of hunger every single month. Many strides have been made to eliminate this issue, yet Lao, Papua New Guinea, and Timor-Leste still have stunting rates higher than 40% within the region. With more than 6 million cases of severe wasting per year, East Asia and the Pacific are striving towards helping these children in work with the UN.

Basic Solutions:

Crucial area delegates need to focus on is allowing for developing nations to have greater access to high nutrients food. This can be done in several ways, with the most important being research and utilization of innovative food resources. A key example would be RUTFs or Ready to Use Therapeutic Foods. These have been developed and implemented throughout developing countries due to their high amount of availability as well as a cost-efficient way of making them in bulk. RUTFs are able to avoid most problems when it comes to transporting and distributing foods to these communities, such as broader access to treatment and reduction in social costs. RUTF's are additionally able to reach three common goals, which include community outreach, outpatient care, and inpatient care. Delegates should research case studies involving innovative foods, which are able to have a greater amount of impact on decreasing the number of malnourished children. An additional issue that delegates should take into consideration is the issue of stunting on children. Stunting has shown to be a key issue that is apparent when it comes to child malnutrition. Globally, 1 in 4 children under the age of 5 years old is stunted, with 80% of this population coming from just 14 countries. Approaches that delegates should utilize is looking into interventions. These interventions should be focused on improving women's nutrition for both before and after pregnancy. This allows for appropriate micronutrient interventions and has been greatly shown to improve the rate of mortality of children. Additionally, it's important that when looking into nutrition programs, it should be able to benefit the community a whole. These programs should ensure that there is political commitment and that there are national programs that back.

Questions to Consider:

1. What has been your country's past efforts regarding eliminating child malnutrition?
2. Is your country receiving any support from other nations to combat this issue?

3. Has your country been heavily active and involved regarding the UN's actions and resolutions?
4. Is your country undergoing any occurrences or events that put them in danger or higher risk of child malnutrition?
5. How will you ensure that your nation is strictly following the Sustainable Development goals in order to improve upon decreasing child malnutrition in the future?

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Topic B: Anti-Vaccination and Children's Health

Background:

Vaccines have become one of the most critical measures of preventative medicine in order to protect populations from issues such as diseases and infections. Their impact has shown to be crucial within the improvement of global health with illnesses that have proved to be shared in the past such as smallpox and rinderpest have been completely wiped out due to vaccines. However, as centuries have passed, there has been a rise within anti-vaccination sentiments with beliefs that vaccines have the capability of harming children rather than benefiting them. The source for the sudden surge of these sentiments comes from entertainment outlets and the media. This has called for vaccination rates to drop steadily, specifically throughout Western countries. With this, the outcome is the increasing amount of outbreaks of diseases that were thought to be "eliminated" such as measles. However, an additional reason for these sentiments includes religion and secular views. With the propaganda stemming from the media and several protests, a large portion of anti-vaxxers has become a public health concern within the Orthodox Jewish community throughout New York and New Jersey. With a rising outbreak of measles within the area, the movement is seen to be influenced by religion, which creates apparent effects on children who are unable to make healthcare decisions for themselves. This trend has actively taken a large toll on the vulnerable and weak immune systems of infants and children. The pattern seen today is similar to the anti-vaccination movement that occurred in the 19th century. The event in which Britain had forced parents to have their children vaccinated, leading to the creation of the Anti-Vaccination League, in which they stated it was an apparent infringement upon their rights and liberty. The nature of this league led to a broad spread of propaganda, leading to the outbreak of measles upon that area. However, vaccines are crucial towards preventing infectious diseases, creating a decrease in childhood infections, and even has the capability of completely getting rid of conditions that have been shown to wipe out entire nations. With propaganda spread throughout these communities, the rate of disease spread will steadily increase due to the negative viewpoints on vaccines. The effects of this propaganda are seen mainly throughout the religious community, especially within Islam and Judaism. The significant reasoning as to why the anti-vax community mostly within these religions is the consumption of pork, which is against their religious values. However, within these vaccines, there is often the ingredient of porcine gelatine, making vaccines often restricted. These communities are often seen to have an increased rate of infection with these preventable diseases. Additionally, a vital issue within religion is that these religious groups use their restriction on vaccines to create their own political stances. An example of this is clearly shown within Nigeria in 2003. Their leaders had greatly influenced their followers not to allow their children to take the oral polio vaccine as they believed it was a scheme to decrease the amount of "Muslim fertility." However, as time went on, it resulted in over 20,000 cases of measles and over 600 deaths in the course of three months. This influence is often carried onto various

countries, which leads to the spread of the idea that vaccines are not to be trusted. However, the roots and critical part of the issue comes from the fact that these religious authorities have a strong influence on their followers, leading to the danger of propaganda. Education is an additional factor that is affecting children that suffer from these anti-vax viewpoints. The spread of diseases and the attack of immune systems created a direct impact on proper education. The movement now not only creates long-lasting effects on the health of these children but has also restricted them from their right to education. Over the years, there have been several protests regarding the exclusion of anti-vax children from schools. Many now believe that this issue is stemming from religious discrimination. Throughout several schools around the world, there are requirements that require these parents to vaccinate their children. However, with countries like the United States, laws have allowed for 19 of their states that don't expect children to be treated when going to school. WHO or the World Health Organization has created an official stance on vaccinations over the years. This stance has stated that through the use of scientific research and studies, the use of vaccines around the world is a critical tool for the prevention and elimination of life-threatening diseases. Most importantly, the use of vaccines has been proven to save over 3 million lives from preventable illnesses every year. The overall goal of WHO is to spread the amount of availability of these vaccines worldwide, which then allows for the deaths from preventable diseases to decrease over time. However, the committee fully recognizes that each nation has its own religious values, ideals, and goals for healthcare. With this, many nations are seen not to believe that there are several other options for improving general health care. This has caused a significant effect on the population of children worldwide, with the rate of those affected and killed by preventable diseases increasing due to these indifferences.

United Nations Involvement:

Vaccines have become one of the most critical measures of preventative medicine in order to protect populations from issues such as diseases and infections. Their impact has shown to be crucial within the improvement of global health with illnesses that have proved to be shared in the past such as smallpox and rinderpest have been completely wiped out due to vaccines. However, as centuries have passed, there has been a rise within anti-vaccination sentiments with beliefs that vaccines have the capability of harming children rather than benefiting them. The source for the sudden surge of these sentiments comes from entertainment outlets and the media. This has called for vaccination rates to drop steadily, specifically throughout Western countries. With this, the outcome is the increasing amount of outbreaks of diseases that were thought to be "eliminated" such as measles. However, an additional reason for these sentiments includes religion and secular views. With the propaganda stemming from the media and several protests, a large portion of anti-vaxxers has become a public health concern within the Orthodox Jewish community throughout New York and New Jersey. With a rising outbreak of measles within the area, the movement is seen to be influenced by religion, which creates apparent effects on children who are unable to make healthcare decisions for themselves. This trend has actively taken a large toll on the vulnerable and weak immune systems of infants and children. The pattern seen today is similar to the anti-vaccination movement that occurred in the 19th century.

The event in which Britain had forced parents to have their children vaccinated, leading to the creation of the Anti-Vaccination League, in which they stated it was an apparent infringement upon their rights and liberty. The nature of this league led to a broad spread of propaganda, leading to the outbreak of measles upon that area. However, vaccines are crucial towards preventing infectious diseases, creating a decrease in childhood infections, and even has the capability of completely getting rid of conditions that have been shown to wipe out entire nations. With propaganda spread throughout these communities, the rate of disease spread will steadily increase due to the negative viewpoints on vaccines. The effects of this propaganda are seen mainly throughout the religious community, especially within Islam and Judaism. The significant reasoning as to why the anti-vax community mostly within these religions is the consumption of pork, which is against their religious values. However, within these vaccines, there is often the ingredient of porcine gelatine, making vaccines often restricted. These communities are often seen to have an increased rate of infection with these preventable diseases. Additionally, a vital issue within religion is that these religious groups use their restriction on vaccines to create their own political stances. An example of this is clearly shown within Nigeria in 2003. Their leaders had greatly influenced their followers not to allow their children to take the oral polio vaccine as they believed it was a scheme to decrease the amount of "Muslim fertility." However, as time went on, it resulted in over 20,000 cases of measles and over 600 deaths in the course of three months. This influence is often carried onto various countries, which leads to the spread of the idea that vaccines are not to be trusted. However, the roots and critical part of the issue comes from the fact that these religious authorities have a strong influence on their followers, leading to the danger of propaganda. Education is an additional factor that is affecting children that suffer from these anti-vax viewpoints. The spread of diseases and the attack of immune systems created a direct impact on proper education. The movement now not only creates long-lasting effects on the health of these children but has also restricted them from their right to education. Over the years, there have been several protests regarding the exclusion of anti-vax children from schools. Many now believe that this issue is stemming from religious discrimination. Throughout several schools around the world, there are requirements that require these parents to vaccinate their children. However, with countries like the United States, laws have allowed for 19 of their states that don't expect children to be treated when going to school. WHO or the World Health Organization has created an official stance on vaccinations over the years. This stance has stated that through the use of scientific research and studies, the use of vaccines around the world is a critical tool for the prevention and elimination of life-threatening diseases. Most importantly, the use of vaccines has been proven to save over 3 million lives from preventable illnesses every year. The overall goal of WHO is to spread the amount of availability of these vaccines worldwide, which then allows for the deaths from preventable diseases to decrease over time. However, the committee fully recognizes that each nation has its own religious values, ideals, and goals for healthcare. With this, many nations are seen not to believe that there are several other options for improving general health care. This has caused a significant effect on the population of children worldwide, with the rate of those affected and killed by preventable diseases increasing due to these indifferences.

Case Study: Samoa Measles Outbreak

In August of 2017, two children had died with incorrect links to vaccination. Samoan officials and WHO had clearly pointed out the trend that after this event there was a steep decline in immunisation. Prior to this event, vaccine coverage had been 84% throughout the island of Samoa. The two children that had died had a clear death due to human error, rather than their vaccinations. However, although it was clear that nurses were convicted of manslaughter after mixing their vaccine with the wrong diluent, it was too late. Misinformation had spread throughout the entire region, and the government had suspended their immunisation programme temporality. Anti vaccine activists had been able to capitalize on the event in which they claimed that the vaccine had been the cause of death. Due to the propaganda being spread, a severe outbreak of measles had plagued the area. A state of emergency was called throughout the Pacific Island of Samoa which had led to several school closures and a widespread ban on public gatherings in 2018. The resurgence of measles had been a global phenomenon. However, this had led to over 65 citizens dying in less than just a few weeks, with 57 of those citizens being under the age of 4. The outbreak in part was blamed on those spreading false information and claiming that vaccinations were dangerous. With this, the government had put out another campaign throughout Samoa. The campaign had aimed to vaccinate over 90% of their population, and had tripled their coverage in just a few weeks. Measles cases are already rising worldwide, even throughout wealthy nations such as Germany and the U.S. Samoa had appealed to the international community for at least 10.7 million to battle and recover from the outbreak. The prime minister, Tuilaepa Sailele Malielegaoi had states that it will fully impact future generations. It was clear that it is imperative to strengthen the culture of acceptance of vaccination in order to create immunity.

Bloc Positions:

Western: Although the U.S. has advanced healthcare, known for its widespread use and knowledge of vaccines, recent studies have shown a decline in those deciding to use them. The rise within this anti-vaccine sentiment has been a clear danger towards overall public health. The fear of vaccines began in the 18th century throughout the U.S. and has gradually allowed for the spread of misinformation. However, there is a clear connection between the anti-vax movement and the economic and social movements throughout the United States. Research has shown that parental perception about vaccination decision-making reveals that factors such as gender, resources, and norms influence parents' choice on the use of vaccines. However, throughout Europe, their population of anti-vaxxers has shown to lead to a public health crisis. With the main issue being the false information spread about the MMR vaccine, a critical solution to decreasing the diseases of Measles, Mumps, and Rubella, however, has incorrect information being covered. Europe is putting its focus on investing in better public health education and vaccination research. Most importantly, a large number of nations have begun or have already created mandatory vaccination policies in order to further the importance of immunization.

Latin America and Caribbean: According to the Pan American Health Organization, studies have clearly shown that current vaccination coverage rates throughout Latin America and the Caribbean are seen to be lower than region-wide rates. In order to identify the barriers to an increase in these rates, they have developed a key literature system in order to classify the factors that are affecting the amount of vaccination coverage. It is clear that socioeconomic factors are taken into consideration, such as a lower level of education, lack of awareness for diseases, and religious beliefs when it comes to vaccination acceptance. Throughout Latin America and the Caribbean, they are clearly working on identifying additional evidence that can be used to understand the barriers towards vaccinations and educate the public adequately.

African: Throughout Africa, the leading cause of anti-vax concerns is the spread of the idea that their people are used as “guinea pigs” for new vaccines. However, regions in South Africa has the highest rate of infection throughout the continent. For instance, in South Africa, it has over 150,000 confirmed cases, with over 2,600 deaths when it comes to coronavirus. Several issues also come into play when it comes to the amount of anti-vax sentiment in Africa. For instance, their history of using traditional healers for these viruses as they believe their medicine will be more effective than vaccines. There are several healer organizations that spread this misinformation and allow their people to think that vaccines are harmful to their health. There have been several protests against the use of vaccines, which has directly impacted the overall health of children within the area. With parents often putting their dependency on traditional healers, it becomes a clear pattern that diseases are more likely to cause their child to pass away due to their ineffectiveness compared to vaccines.

Asian-Pacific: Although throughout the Asian Pacific area, it has been seen that they are increasing their research and awareness for vaccines, there have been several issues. For instance, with the anti-vax push that has recently begun, there has been a rise in measles cases. The U.N. health agency had worried that with this steep decline in immunization it is able to spread nation to nation. This has become a prevalent issue, with measles being able to create serious complications such as pneumonia and inflammation of the brain, which has been proven to create permanent damage, especially towards children. The UN has recognized that misinformation has led to these issues and that policy changes must be made throughout the Asian Pacific Region.

Basic Solutions:

Delegates need to recognize the stem root of why there are anti-vax sentiments throughout every country. Although there can be a definite amount of funds and efforts put into vaccinations worldwide, it needs to be made clear that socioeconomic factors can lead to the spread of misinformation. However, in order to allow for the increase in immunization, delegates should look towards the country’s political voices. One of the key ways to improve upon decreasing the spread of misinformation and improving vaccination rates is through the use of policy changes. By finding essential models, such as past country’s legislative changes towards

their policy on vaccinations, specifically successful ones, delegates can find solutions that model after the example—for instance, looking towards the U.S. and their laws on mandatory vaccinations of children. By looking at those rates and how it was able to benefit their country, delegates can find critical trends and patterns that can be focused on in order to improve upon vaccination rates. An additional way delegates can improve upon immunization coverage for children is going to some of the root factors for the spread of misinformation. It is often seen that for countries that have the lowest immunization rates, their average coverage of basic education is lower than worldwide rates. Through the use of find methods of improving public education throughout regions, specifically developing nations, there can be a critical amount of improvements towards immunization. This includes being able to allocate funds towards public health awareness on the benefits of vaccines as a whole. With this, parents will feel more inclined to choose to get their child vaccinated, as they are able to see the rates of success and lower the number of deaths from preventable diseases.

Questions to Consider:

1. Are there additional issues (i.e., economic, political) that are able to lead to anti-vaccination movements throughout your nation? What policy changes are needed to address these issues?
2. Are there specific populations throughout your country that don't agree with vaccination? If so, what is their reasoning, and what alternatives are there for them to receive more exceptional healthcare without inflicting upon these beliefs?
3. Are mandated vaccines an infringement on religion, human rights, and personal sovereignty?
4. What can be done to encourage the global community to choose vaccination, and it is the responsibility of the international community or individual nations to their people?
5. Is legislation able to prevent anti-vaccination promotion or the spread of propaganda for information regarding health care?

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