Background Guide

UNICEF: Children's Death by Preventable Illness

BunnyMUN VI

L.B. Poly - October 25, 2025

Background Guide Table of Contents

Head Chair Letter

Dear Delegates,

My name is Annali Bojorquez, and I am so excited to be serving as your co-head chair for Bunny MUN's UNICEF committee. I'm a junior and I have been involved in MUN since my freshman year, but only started doing conferences last year, so I understand how intimidating they can be at first. I am really excited to be chairing this year and hope you all have the best experience. Besides MUN I play soccer, run track and cross country, and am VP of Poly's UNICEF club and Female Leadership Academy. I love reading and yoga, and want to be a diplomat (hence my involvement in MUN). My favorite books are *The Cruel Prince* and *The Picture of Dorian Gray*, and my favorite singer is Ariana Grande.

I am so excited to meet all of you and help you through this awesome experience. I can't wait to see what you make of this room and if you ever need any help don't hesitate to email me or my fellow chair. This room is a really interesting one I think you will all love. Don't forget to be creative and keep it interesting. Good luck and have an amazing time!

Sincerely,
Annali Bojorquez

UNICEF | Co-Head Chair | amariebojorqz@gmail.com

HEAD CHAIR LETTER

Hello Delegates!

My name is Sela Hacegaba and I'm so excited to be one of your co-chairs for Bunny MUN's UNICEF committee this year! I'm currently a junior and am part of MUN at Poly, but my very first introduction to MUN happened to be in Bunny MUN! It was such a memorable experience and I'm so grateful to have the opportunity to help out with the conference this year (full circle moment!)

MUN is something I've grown to love more and more because it allows you to explore diverse perspectives and work together with others to create a positive difference in the world. My favorite part of MUN, though, is the kind and encouraging community—I'm so fortunate to have met such wonderful people through it.

At Poly, I'm also involved in choir and several clubs, like UNICEF, Equity & Inclusion, and Garden Club. In my free time, I enjoy reading, painting, traveling, playing piano, spending time with family and friends, and watching k-dramas (let me know if you have any good recommendations!)

Even if you're feeling nervous about conference day, remember that we are all learning and growing together. I hope you will be inspired to be brave and share your creative insights—your voice is valued and each idea truly makes a difference! I'm looking forward to meeting you all and hope you make special memories and friendships at Bunny MUN!

Please feel free to reach out with any questions, we are here to support you and would love to hear from you!

Sincerely,

Sela Hacegaba
UNICEF | Co-Head Chair | selahace@gmail.com

Vice Chair Letter

Hi Delegates!

My name is Taylor Chay, and I am thrilled to be your Vice Chair for this committee! I am eager to hear your creative solutions and witness your collaboration.

I am a junior, but I was in your shoes just three years ago! BunnyMUN was my first conference, and I would have never imagined from then that I would be on a dais and Co-President of our MUN program here at Long Beach Poly! My eighth-grade English teacher at Newcomb encouraged me to join MUN, and I have since learned more about our world, grown in confidence, and built cherished friendships. BunnyMUN is dear to my heart, as my dais were incredibly kind and supportive. I hope we can provide you with the same welcoming and warm environment! Aside from MUN, I am Co-President of our school's UNICEF club (very fitting for this committee, haha) and Co-Editor-in-Chief of our school's newspaper! Outside of school, I love to travel, journal, bake, and listen to music.

When I initially joined MUN, I was very shy, so I know MUN can be intimidating. I encourage you to step outside of your comfort zone and be confident (even if you have to fake it)! By the end of the day, I hope you develop your public speaking and research skills. But more importantly, I hope you have fun and walk away with some new friends! I am ecstatic to meet you all, and if you have any questions, please do not hesitate to reach out to me or anyone else on the dais!

Sincerely,

Taylor Chay

UNICEF | Vice Chair | taylorchay32@gmail.com

How to Mun

So, you're probably wondering: How do I prepare for debate? Well, here are some starting points to begin your country research!

1. Read through this background guide
    a. find your country in Bloc Positions (pg. TKTK) and read that paragraph
2. Look for information on your country in the CIA World Factbook and BBC Country Profiles, linked here:
    a. https://www.cia.gov/the-world-factbook/countries/
    b. http://news.bbc.co.uk/1/hi/world/europe/country_profiles/default.stm
3. Look at the Questions to Consider (pg. TKTK) and try to answer them (do some research on the internet!)
4. Do more research on the internet for:
    a. previous country actions
    b. previous NGO and United Nations actions
    c. possible solutions

During the committee, all delegates will present an "opening statement." This is a short introductory speech and will only last about 30 seconds to 1 minute—nothing too bad! You can practice and time your speech using a timer.
These opening statements are written beforehand. They don't have to be memorized, either. You can print or write your speech, then read off the paper.

Your opening statement should include:

1. Your country's position on the issue at hand
2. What your country has done in the past
3. Possible solutions that align with your country's position
    a. This is what you will discuss in the main part of the committee! Including this in your opening statement is a great way to let other delegates know where you stand.

Committee Description

UNICEF, the United Nations Children's Fund, was established in 1946 with the purpose to uphold and advocate for the lives of every child around the world. Its goal is to nurture every child's right to fulfill their potential as they grow up, as well as empower and elevate the voices of the youth (especially at the governmental level), as they are the future of tomorrow.

UNICEF is dedicated to ensuring that children receive safety and protection, nutrition and clean water, healthcare, and quality education, particularly in regions affected by crisis (conflict, natural disaster, and disease outbreaks), where these essential needs are scarce. As the world's largest supplier of vaccinations, UNICEF's humanitarian efforts expand across over 190 countries and territories across the globe.

In every aspect of its mission, UNICEF is guided by the core values of the Convention on the Rights of the Child, which describes what every child needs in order to thrive and flourish. These rights include, but are not limited to, unity with family and access to education. This treaty is vital to fostering respect and dignity for children's well-being and quality of life, providing them with as many opportunities as possible.

Topic Synopsis

In modern-day society, more illnesses than ever have life-saving treatments. Unfortunately, not everyone has access to them. With nearly 5 million children dying before their fifth birthday globally, the necessity of addressing this global crisis is clear. A vast majority of children's deaths come from common diseases, such as pneumonia, malaria, and diarrhea, which are all curable with access to affordable healthcare. The fact that these diseases are all preventable is especially disheartening, given that children face unequal chances of survival based on circumstances beyond their control, including location, socioeconomic status, and whether they live in a conflict zone. Each child's death hinders the development of a nation and exacerbates the cycle of poverty. Additionally, families are left to live with an irreparable void caused by a child's death, leaving parents and siblings susceptible to PTSD and other mental challenges that make it difficult for them to provide for each other. Because children carry so much potential, investing in their health and well-being is crucial for a prosperous future. Delegates in this UNICEF committee will collaborate to address the systemic problems that cause inadequate access to medical care and will create sustainable solutions for a healthier world.

Background

ENVIRONMENT

Nearly a quarter of the global population currently live in conflict or vulnerable settings, which are defined as areas facing severe political instability, armed conflict, or violence. This leads to 53% of deaths of children under the age of 5 occurring in these zones. A child's environment can have a significant impact on their access to health and medical care. Children living in conflict areas or war zones are at a far higher risk of injury and disease, where existing medical care facilities are not able to properly function, whether from damage to infrastructure, abundance of patients, or lack of resources.

The UN has taken steps to remedy this, such as the 2011 United Nations Security Council resolution 1998, which declares hospitals off limits for armed groups and military activities, and allows public reporting of the parties who attack them. Unfortunately, this resolution has not always proven effective, and delegates must keep in mind the real-life responses to existing solutions. Additionally, social detriments of health lead to the spread of preventable illnesses and are common in conflict zones and developing nations. Monopolies over supplies and aid also exist in these areas, which is when an entity (such as a government) controls an entire market. This makes basic necessities difficult to access for common people.

INFRASTRUCTURE

Infrastructure refers to the facilities and systems put in place to serve the needs of the community and economy surrounding it. This includes hospitals, clinics, and other types of medical facilities. Without sufficient infrastructure, a community goes without accessible healthcare, and easily treated ailments can have drastic effects.

Some effects include basic healthcare like vaccines and primary care becoming few and far between, especially those necessary for preventing common childhood diseases. Even areas with medical centers may be lacking proper equipment, making them less helpful in emergency situations, and basic treatment subpar. Infrastructure also applies to education and schools, as without proper education, people will be unaware of how diseases and infections spread, putting them increasingly at risk. In some countries, anti-vaccine sentiments have recently begun to spread, putting an extra risk to children's health, even within countries that have the infrastructure to support it. Furthermore, poor medical infrastructure can mean limited accessibility, with the nearest hospital or clinic being miles away from rural communities and the children living in them.

SOCIO-ECONOMIC STATUS

Every child is born into a certain social and economic demographic determined by factors such as parents' occupation and education. Unfortunately, this means that children from financially disadvantaged families are more vulnerable to illness for a variety of reasons, including crowded living conditions with inadequate sanitation and unsafe drinking water, and malnutrition, a condition where the body struggles to function due to a lack of sufficient nutrients. These conditions all weaken children's

immune systems and result in impaired growth, as well as a lesser likelihood of survival.

Additionally, these children are more likely to be unvaccinated, in part due to the lack of community resources. According to the International Center for Equity in Health, 1 in 5 children who live in the most poverty-stricken areas are zero-dose, meaning they have never received a single vaccine shot in their lives. On the contrary, the same study indicated that 1 in 20 children from the wealthiest areas are zero-dose.

While some parents may have the misconception that vaccines are untrustworthy, this is hardly the case for parents from the least developed countries, who often want to vaccinate their children. Rather, the issue lies in the fact that vaccines can be expensive and are not always available. Although some programs provide vaccines for free, families might struggle to find transportation to health clinics and may also have to take time off work.

POSSIBLE SOLUTIONS

Many children, especially those living in economically disadvantaged communities or areas impacted by drought and natural disaster, are affected by illnesses such as pneumonia, malaria, and tuberculosis that could be avoided with access to clean drinking water and balanced nutrition, simple preventative measures, health education, and proximity to medical care.

Widespread distribution of antibiotics, vaccinations, and implementation of hygiene and sanitation practices would lead to strengthened protection against pathogens. Additionally, proper nutrition and vitamin supplementation would also improve growth, vision, and immunity, especially for infants and young children who are still developing. Devices such as mosquito nets and diagnostic tests could be

supplied to discourage insect-borne diseases, as well. Other technologies, such as drones, could be used to deliver medical supplies to hard-to-reach areas.

Furthermore, mobile clinics could provide reliable access to essential health services for children, especially those living in rural areas or in the midst of conflict zones. These clinics could also enlist the assistance of village health workers, specially training them to provide medications, administer screenings for early detection of disease, and spread accurate information about prenatal care, dietary health, and community health through support groups and workshops.

A final solution to be considered is the expansion of education. Education has been long connected to social mobility and higher salaries, which allow families the financial bandwidth to pay for nutrient-rich foods such as fresh produce and meat. Beyond providing life-saving resources, this could empower people to achieve economic independence through local business projects, which in turn benefits the local community. In the long run, education allows for people to better manage their families' health, thus reducing the chances of preventable illness.

UN Involvement

The United Nations, also known as the UN, plays an important role in fields like humanitarian aid, including negotiations to solve problems and support nations in need. The UN has been tirelessly working to lower the child mortality from preventable diseases internationally. Through resourcefulness, as seen in the Sustainable Development Goals (SDGs), healthy lives and well-being for people of all ages have been prioritized in Goal 3.

As the largest single buyer of vaccines worldwide, UNICEF provides for more than 2 billion doses of vaccines every year, which is enough to vaccinate 45 percent of children under 5. With UNICEF's assistance, over 90 countries reduced their under-five mortality rates by at least two-thirds compared to the rate of 1990. Despite child mortality rates reaching historic lows, SDG 3 is still not on track. To be on track for SDG 3, the UN has emphasized the need for investing in disease prevention and treatment and addressing gaps in access to healthcare. The UN strives to better countries and create a more stable and quality environment by collaborating with governments and other non-governmental organizations like the Gavi Alliance and the The World Bank, helping to ensure the medical well-being of children worldwide.

Bloc Positions

African Bloc

Children in Africa are disproportionately at risk of preventable illness compared to any other region, as approximately 1 in 5 children in Africa do not receive all the essential and basic vaccines. Some common preventable childhood diseases in Africa include malaria, pneumonia, diarrhea, and measles. Malaria is especially prevalent in Africa, as last year, the World Health Organization reported that 95% of global malaria cases and deaths occurred in Africa. Out of the malaria deaths in Africa, 76% were children under 5. On top of preventable illnesses, socio-economic challenges have contributed to Africa's high child mortality rate. Many nations in Africa struggle to support high-quality medical care, as they tend to have a limited number of healthcare professionals, as well as a lack of equipment and infrastructure.

The African region has emphasized the need for increased investment in healthcare. They have also promoted strategies of comprehensive care, highlighting the importance of improving access to safe and clean drinking water and nutritious foods as methods to tackle issues beyond strictly medical methods.

Asian Pacific Bloc

Similar to Africa, South Asia and Southeast Asia make up a large percentage of children's deaths from preventable illnesses due to the same factors of socio-economic inequities. However, a common issue shared across all of Asia and the Pacific is air pollution, which can lead to a variety of respiratory complications. Because children's lungs are still developing, they are especially sensitive to air pollutants, and may even be permanently harmed by them. This has grown to be a driving factor for high child

mortality rates, as UNICEF estimates over 100 children in Asia die every day due to air pollution. While these death rates are staggering, Asia has made drastic improvements over the past years. From 1990 to 2022, the child mortality rate in Asia and the Pacific declined by over 70 percent, marking a success in Asia in the fight against children's death by preventable disease.

To continue making progress in healthcare, the Asian Pacific Bloc has up-scaled immunization programs and implemented various sanitation and nutrition programs. In addition, many nations from this bloc have expanded healthcare to rural areas by increasing public investment and expanding digital resources.

Eastern European Bloc

Although many European nations have a significantly lower child mortality rate in comparison to other regions, Eastern Europe faces a higher burden of death from preventable illness compared to Western Europe. Preventable mortality rates are twice the European Union's (EU) average in many Eastern European countries, reflecting the rise of vaccine hesitancy. While only 21% of EU citizens report low levels of trust in their country's healthcare system, nearly half of Eastern Europeans distrust their healthcare system. One reason for this can be a lack of health education, which can cause more distrust in established medical practice and trust in less established anti-vaccine sentiments.

To combat this, Eastern European governments have been encouraged to increase honest communication with the public about vaccine effects. Since preventable illness is not the leading cause of death for children in this region, this bloc can share solutions and strategies for tackling health concerns.

Western Bloc

Despite having the reputation of some of the world's strongest healthcare systems, the World Health Organization still estimates that over 75,000 children in Europe die before their fifth birthday. While there is still work left to be done, the European Union (EU) has been crucial in improving children's healthcare. The EU's partnership with UNICEF has increased awareness programs, provided more funding for immunization services, and focused on reaching children in rural areas.

With a powerful economic foundation and diplomatic influence, this bloc has great potential to advocate for the least developed nations. Countries in this bloc might contribute financial support and technical assistance to those in need, and may also promote making healthcare more accessible and affordable.

Latin and Caribbean Bloc

The Latin American and Caribbean region has made great strides in reducing childhood disease, as in 2022, the death rate of this region for those under 5 declined by 60% since 2000. However, diseases like flu, malaria, and pneumonia remain a leading cause of death for this age group. Socio-economic circumstance is the main reason for this. In particular, children from Latin America and the Caribbean face widespread poverty. With underfunded public healthcare systems and financial barriers, it is sadly predictable that 1 in 4 children from this bloc are unvaccinated.

To address this issue, this bloc has shown a commitment to following the humanitarian approach. By partnering with various non-governmental organizations and taking measures to increase community care access, this region has been a leader in improving children's healthcare.

Questions To Consider

1. What are the main obstacles to accessing healthcare services?
2. How can antibiotics, immunizations, and other services be provided in an equitable and inclusive way, so that each child receives the care they need?
3. How can awareness of safe hygiene and other healthy practices be made more widespread?
4. How can safe medical facilities and mobile health clinics be made more accessible, even in rural areas or conflict zones?
5. What are some ways that village health workers and medical volunteers could best support children and families to reach optimal health and well-being?
6. What are some possible ways to sustainably cultivate nutritious foods and purify drinking water across a variety of different environments?
7. What kinds of classes, workshops, and programs could be provided to educate children and families on the importance of community health?

References

More on Preventable Illnesses
Childhood Disease
The Global Burden of Vaccine-Preventable Infectious Diseases in Children Less Than 5
Malaria

More on Child Mortality
Levels and Trends in Child Mortality
Child Mortality in the EU
WHO Europe Health Report
Air Pollution and Health

Infrastructure
National Library of Medicine Infrastructure

Conflict Zones
Ensuring Healthcare in Conflict Zones

Possible Solutions
Immunization
Data on Immunization
Community Health
Mobile Health Clinics
Building Trust in Vaccine Uptake
Innovating to Save Children's Lives

More on UNICEF's Work
About UNICEF
Convention
Respect for Children
UNICEF Achievements Asia and Pacific Region
UNICEF and the European Union
UNICEF and PAHO
Every Child Protected From Deadly Diseases