Committee for Health and Welfare

Committee Bulletin

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Committee Directors

XII DALE
DEBATE ACADÉMICO DE LÍDERES ESTUDIANTILES

Table of Contents

Welcome letter from Committee Directors

Hello everyone! My name is Débora Ester Hernández Lizano. I'm 16 years old and a junior at Nicaragua Christian Academy International. My journey in debating began at DALE's 9th conference in 2022, profoundly shaping my life ever since. I am honored to have won the PAHO award for Best Delegate at DALE and am thrilled to serve as your co-chair for this same committee this year. My involvement has also extended to participating in various Model UNs, including HACIA Democracy and CRIMUN. Debating has fostered my personal growth, empowering me to articulate my thoughts and tackle challenges, even in the most intimidating situations. This year, as I co-chair our committee, I am committed to making this conference the best one yet. I eagerly anticipate welcoming new participants, it's a transformative experience, and I can't wait for you to discover your voice through it!

Hello delegates! My name is Vanessa Ocampo and I'm so enthusiastic to be one of your chairs in this upcoming XII DALE conference. Now, before I begin introducing you to some of the characteristics and hobbies that make me who I am, I would like to foremost congratulate you on joining DALE, especially if it's your first time-I know it can seem frightening at first, it once did for me. My debating journey really began just a mere 2 years ago in DALE X, in which-I not only discovered my love for the world of argumentation, but reaffirmed my passion for international affairs and politics. As of this date, I'm preparing for PANAMUN XXII, and have my sights set on more events such as these for the future. However, shifting some focus apart from the social sciences, some of the things I also enjoy the most include reading, listening to music, and spending time with my friends. And whilst this description might seem pretty vague, it's perfect-saving the rest of introductions for when we meet in April. Once again, I am already so proud of you all-please remember to study!! I go by the popular saying: a delegate is only as good as their research. See you soon delegates!!

We wish the best of luck to our dear delegates. Our main objective is that agreements that push

towards sustainability, peace, development, and prosperity are reached in this debate. We hope that all your preparation and hard work will be shown and that everyone is inspired through the collaboration within the team.

Sincerely your co-directors, Débora Hernández & Vanessa Ocampo

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Introduction to Committee for Health and Welfare:

This committee is dedicated to addressing critical issues related to public health, social welfare, and the equitable distribution of resources that ensure the dignity and quality of life for all, concentrating on Latin America.

Our mission is to foster international cooperation and innovative solutions to tackle pressing global health crises, bridge disparities in healthcare access, and promote the holistic well-being of populations worldwide. As delegates, you are entrusted with the responsibility to analyze complex issues, debate diverse perspectives, and collaborate on comprehensive resolutions that can shape a healthier and more equitable future.

Your contributions will be essential in creating actionable policies that protect vulnerable communities, support sustainable healthcare systems, and advocate for human rights in the realm of health and welfare. Let us work together with dedication, empathy, and a shared commitment to safeguarding human dignity.

Welcome to the Committee for Health and Welfare. We look forward to your insights and leadership throughout this conference.

TOPIC A: Water Sanitation and Access

1. Introduction

Latin America, with its gigantic rivers, teeming rainforests, and abundant natural riches, is torn by a contradictory reality: millions of people around the region remain without access to safe drinking water and adequate sanitation. This silent epidemic, partly overshadowed by other international public health concerns, is a source of significant hazard to public health, economic well-being, and sustainable development. It is estimated, based on the Pan American Health Organization (PAHO), that some 77 million inhabitants of Latin America and the Caribbean remain without basic drinking water supply, and 100 million are without proper sanitation facilities (PAHO). In spite of advances in some regions, the accelerated rate of urbanization, population growth, climate change, and environmental degradation have placed tremendous pressure on water resources and infrastructure and, in turn, worsened the situation

The consequences of poor water and sanitation are far-reaching, leading to the transmission of waterborne diseases such as cholera, diarrhea, and hepatitis A. These diseases disproportionately affect vulnerable groups, including poor communities and rural communities with poor access to clean water. Waterborne illnesses account for a significant percentage of child deaths in the region, and diarrhea is among the leading causes of death among children under the age of five. Moreover, cholera and leptospirosis cyclical outbreaks have been blamed on unclean water sources and poor sanitation, as a public health threat that still lingers. Perhaps the most significant concern is water source contamination through industrial waste, agricultural runoff, and indiscriminate waste management. Lakes and rivers that have traditionally served as major sources of drinking water are increasingly becoming polluted by chemicals, sewage, and pathogens. Agricultural farming that involves massive applications of pesticides and fertilizers has led to harmful levels of pollution in some areas, making water unsuitable for drinking. The pollution is not limited to the rural areas; the majority of the urban cities also face polluted water sources due to the release of untreated wastewater and industrial disposal waste (IDB).

Climate change worsens the problem by altering precipitation patterns and increasing the intensity and frequency of floods and droughts. When water becomes scarce in some locations and floods contaminate water sources in others, communities then face shortages and contamination. For instance, the Andean region has experienced protracted droughts that

threaten drinking water sources and agricultural productivity, while coastal populations experience contamination via increasing sea levels and saltwater intrusion (PRB). Social and economic inequalities also further exacerbate the water crisis, as poor communities are often deprived of access to clean water and basic sanitation facilities. Indigenous communities, migrants, and residents of informal settlements are the most vulnerable since they tend to drink from contaminated water sources or lack adequate sanitation facilities. Such inequality not only enhances the risk of disease but also perpetuates poverty and unhealthy living conditions. The lack of sanitation and clean water disproportionately affects rural areas and low-income households, contributing to persistent health disparities. The COVID-19 pandemic has shown the critical importance of hygiene and access to clean water. Handwashing, one of the most effective measures to prevent virus transmission, remains a challenge for those without reliable water supplies. This has underscored the urgent need for investment in water infrastructure and public health education to universalize basic hygiene practices. The pandemic also revealed vulnerabilities in emergency access to water, especially in densely populated areas where hygiene practices were critical in containing the outbreak.

Economically, dirty water and sanitation are major development barriers. Poor water quality not only costs more in healthcare but also undermines productivity and economic stability. Communities affected by waterborne diseases have lower labor force participation and increased absence from work due to illness. The Inter-American Development Bank (IDB) indicates that investment in water and sanitation infrastructure can yield high economic returns by reducing healthcare costs and enhancing workforce productivity. The IDB predicts that four dollars in economic benefit in improved health and productivity for each dollar invested in water and sanitation is achieved (IDB).

Addressing the water crisis in Latin America entails a great approach that includes investment in new infrastructure, community management of water, and environmental protection and pollution control policies. It requires concerted efforts from governments, international organizations, and local societies to develop sustainable alternatives that guarantee access to clean water and sanitation for all. Public health campaigns that raise awareness of hygiene behavior and the importance of clean water should be included in these initiatives. Strengthening legislation related to wastewater management and implementing environmental protection legislation are also essential to reduce water pollution due to

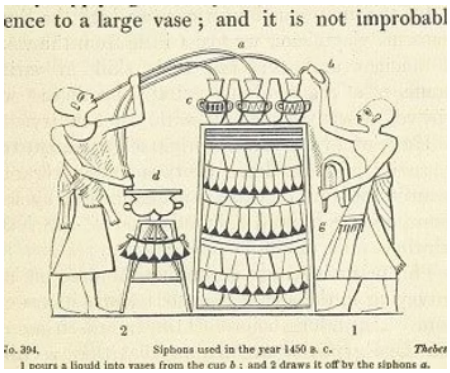
agriculture and industry. Additionally, innovative steps such as rainwater harvesting, recycling of wastewater, and community-based sanitation programs can go a long way in improving water security and quality. The work is immense, but so is the opportunity for positive transformation. By making safe water and sanitation a priority, Latin America can take an important step towards improved public health, social equality, and secure, sustainable communities. Addressing the root causes of the crisis and committing to sustainable solutions will be essential to safeguarding the health of millions and creating a healthier, more sustainable future for the region.

2. Historical Context

Throughout mankind's history, access to water has always been a key factor in our societies. From the great, several millennia-lasting, Egyptian civilization with its Nile river to small societies such as the tribes of the Americas with their Cocibolca and Xolotlán, the presence of fresh and consumable water has been a necessity. We have built our cities and established nations around this resource, which highlights its great importance. However, in this day and age, humans have started to underappreciate and waste the lifeline that is water. Pollution, contamination, exploitation, and greed have all affected our access and the quality of our sources of this resource.

How Humans Purified Water

With regards to the origin of how humanity has purified water, according to the National Academy of Sciences, "Pictures of apparatus to clarify liquids (both water and wine) have been found on Egyptian walls dating back to the fifteenth century B.C." (p. 10, 1977). They used methods such as filtration with gravel and boiling to ensure that the water they were consuming, although it being fresh and from the river, did not contain any harmful substances. Historians cite these methods as the first example of water filtration.



Drawing of the filtration by gravel method

(Credit: Green Synergy)

First Water-based Infrastructure

Later, around the year 200 B.C., "the Romans built aqueducts which used gravity to supply water to their communities." (Green Synergy, 2020), this being the first example of infrastructure built in order to access water. Around this time, Archimedes invented a water screw that allowed them to move water from low to high ground. This device is still in use today in several northern European towns. However, the biggest issue surrounding access to water and the sanitation of the resource wouldn't necessarily occur until 1854.

Early Issues with Water Infrastructure

In the 19th century, Cholera became a massive problem in many European cities, spreading from the Indian subcontinent, all the way to places such as London and Berlin. According to the National Library of Medicine, the scientist John Snow "conducted pioneering investigations on cholera epidemics in England and particularly in London in 1854 in which he demonstrated that contaminated water was the key source of the epidemics." (2018), noting that the poor treatment of the city's Thames river and water systems were major factors. Snow compared clients from two different companies that provided access to water. Rates of infection among clients of the distribution system drawing contaminated water far exceeded the rates among those served by the company whose water intake was from above the contaminated section of the river. This event is a key milestone for how water-based infrastructure absolutely needs to be a well-planned and extensively thought out part of human life.

Current-day Issues

Nowadays, in the Americas, there are many ways that people find their access to water hindered: disease, droughts and lack of sanitization. According to the United Nations Economic Commission for Latin America and the Caribbean, "In Latin America and the Caribbean, 25% of the population lacks access to drinking water, while 66% have no access to safe sanitation services." (2023). This means that there are millions of individuals who are still in need of basic access to water and that most are not able to take any form of action against this crisis. This issue not only affects third world nations, however. In 2014, in the city of Flint (Michigan), officials switched their water source from lake Huron to the river Flint. The switch caused water distribution pipes to corrode and leach lead and other contaminants into municipal drinking water. This event highlights the need to have proper planning in urban water infrastructure.

Picture of water from a tap in Flint, Michigan

(Credit: American Chemical Society)

Droughts

Finally, in recent years, droughts have been taking place all over the world, especially in the Americas. To name a few: Petorca, Chile (2010-present), Uruguayen Drought (2022-2023), Brazilian Drought (2014-2017), North American Drought (2020-2023), among many others. The human role in the frequency of droughts is substantial, as humans contribute to this crisis through activities like deforestation, overgrazing, excessive irrigation, and urbanization, which reduce water availability and soil moisture, and exacerbate climate change.

3. Essence of Debate

The discussion surrounding water sanitation and access involves a complex array of health, government and social issues concerning the wider global community. When debating about expanding accessibility to a resource as vital as water, it is imperative that the numerous challenges presented by the issue are properly addressed.

In many places across the globe, particularly in developing areas, the systems that deliver water are old and outdated. This prevents clean water from reaching communities, leaving them to rely on using unsafe and unclean water instead. Families who don't earn much money find clean, treated water too expensive. Because of this, they often have to turn to cheaper options, even if those options aren't safe to drink. Rural areas, on the contrary, often face even more severe challenges, lacking essential pipelines and water treatment facilities. This is all substantially worsened by pollution from big industries and major corporations, agriculture, and poor sanitation— all continuing to degrade water quality and raising the risk of waterborne diseases.

How water is managed is another factor to take into consideration. While some have argued that privatization makes things more efficient, this eventually increases prices, making clean water costlier for lower-income people. Public management, on the other hand, does not suffer from accessibility problems but has resource and maintenance problems all the same.

Synchronized, clean water for all requires strategic and balanced approaches- infrastructure, affordable rates, and sustainable management. These issues are serious for public health and access to water, whether in remote or wealthy areas. Safeguarding this basic necessity is, without doubt, a vital aspect of our committee's wider commitment towards expanding and protecting the lives of people in the Americas.

4. Topics to be Discussed

Infrastructure Challenges

Contrary to popular belief, many communities in the Americas don't currently have any physical infrastructure that supports the provision of dependable and safe water. Old pipelines, malfunctioning treatment facilities, and inadequate distribution networks, especially in rural and developing areas, usually constitute an impediment to accessibility. Neglect and poor maintenance also pollute the water supply and put public health at risk. If repairs or replacement systems for much of this infrastructure are not funded, many will hence find it impossible to receive safe drinking water for their homes. Therefore, it is primarily through infrastructural improvement that access to safe drinking water can be guaranteed for all throughout the region.

Affordability

Even in cases where water is available, availability to clean resources can still be incredibly limited, and usage costs may lead to access difficulties. Many low-income communities are forced to pay prohibitively high utility rates for access to drinking water, or unsafe access to water altogether. In some instances, privatized water utilities have increased costs to families associated with clean drinking water. Price increases from these privatized entities can further impede a family's ability to afford it all together. Moreover, without increasing costs to users, the government may lack the capital to support the growing system. Public programs and subsidies are therefore crucial to achieving affordability and assuring that costs do not hamper a household's access to a basic human need, such as water.

Urban v. Rural Disparities

Both urban and rural areas alike face challenges when it comes to water sanitation, yet vary to the degree of which this one impacts them. Urban areas, for one, have better water infrastructure, although overcrowding and informal settlements can put a strain on resources. On the other hand, hundreds of rural areas do not have access to centralized water systems and often depend on untreated wells or other water sources. Lack of access to clean drinking water due to these inequalities pose a serious health threat for millions of people, and it does so regardless of residency.

Contamination Sources and Disease

Pollution from industrial waste, agricultural runoff and inadequate sewage treatment can leave water supplies severely damaged. Unsafe drinking water puts people at risk for diseases including cholera and dysentery, becoming particularly dangerous in areas or regions where the healthcare system is ineffective or mismanaged. In order to properly prevent outbreaks and epidemics, water sanitation are some major components.

Privatization v. Public Water Management

When discussing water system management and sanitation, the roles of private businesses and governments differ. Public management seeks to create service access and affordable prices, yet under-funding can lead to numerous inefficiencies. Privatization, on the other hand, has the potential to improve the quality of services, but the displacement of public funds into private ones often drives up costs and limits access for lower-income individuals. Consequently, one of the greatest challenges in the domain of water governance is the constant negotiation between accessibility to the public against profit, and the generation of new revenue and accessibility mechanisms.

5. Questions to be answered

a. What are the most significant obstacles to universal access to clean water and sanitation in Latin America, and how can they be addressed?

b. How has climate change tended to impact water availability and quality across large regions of Latin America, and what adaptive techniques are most effective?

c. What is the role of socio-economic inequalities in determining access to clean water and sanitation, and how can the government work to minimize these inequalities?

d. How has the COVID-19 crisis highlighted the importance of water sanitation for public health, and how can lessons from the disaster be applied to improve water facilities?

e. What are the best practices in water management at the community level in Latin America, and how far can they be expanded to cover larger segments of the population?

f. How far will regional cooperation and investment facilitate the realization of sustainable water and sanitation programs in Latin America, and how is long-term implementation ensured?

Topic B: The Dengue Outbreak

Patients are treated for dengue fever at a hospital in Nicaragua, one of the countries where the virus is surging in 2019, Article by NPR

Introduction: What is the dengue virus?

The dengue virus is one of the most rapidly proliferating mosquito-borne viral infections worldwide. The prevalence of this virus has seen a noticeable increase in the recent decades with the figures of 100 to 400 million cases per year happening in more than 100 countries. (WHO, 2024) So far, the world population is at risk of almost half getting infected with dengue. chiefly in the regions having tropical and subtropical climates inhabited by the Aedes aegypti and A. albopictus mosquitoes and this disease along with others has due been converted to the nemesis of Public Health exacerbated due to fast urbanization, climate change, and an absence of sustainable intervention strategies in the sick regions.

The main aspect to be felt Regarding Dengue, is that even though the majority of them show no symptoms, the risk of life-threatening complications in severe cases can lead the situation to turn out to be serious. The disease is highly concentrated in clusters of patients living in crowded urban slums characterized by insufficient healthcare systems targeted due to different reasons. A circle of maladies in the form of the lack of communication with the source hospitals, a retarded number of treated sick people in a short period together with death cases.

Symptoms and Complications:

Dengue fever which has become often compared to the flu called by one of the four closely related serotypes is caused by DENV-1, DENV-2, DENV-3, and the one of DENV-4. Initial ills manifest after an incubation period that can last from one day to ten, often consisting of a high-sudden fever, intense headaches, and muscle and joint pain. It is also often associated with nausea and vomiting followed by a skin rash. It is true that the majority of cases are cured within a few days or weeks but some patients get this dangerous dengue worse which is also known as dengue hemorrhagic fever. This is the possible fatality situation in which proper supervising is not done through the following methods: plasma leakage, severe bleeding, respiratory distress, or organ failure (WHO,2024)

The risk of severe dengue is significantly higher among individuals who are infected for a second time by a different dengue serotype, a phenomenon linked to antibody-dependent enhancement. This mechanism allows the virus to replicate more efficiently, leading to a heightened immune response that can result in severe complications. Children, the elderly, and individuals with pre-existing conditions are especially vulnerable to severe outcomes. Without proper and timely medical care, fatality rates can be high, but early detection and supportive treatment often reduce mortality rates to below 1% (WHO, 2023; PAHO, 2024)

Transmission:

The dengue virus is transmitted primarily through the bites of infected female mosquitoes from the *Aedes* genus, particularly *Aedes aegypti*. These mosquitoes thrive in urban environments, often breeding in standing water found in discarded containers, water tanks, and other man-made habitats. Their ability to adapt to human environments makes them highly efficient vectors, allowing the virus to spread rapidly in densely populated areas. The *Aedes aegypti* mosquito is unique in its daytime feeding habits, increasing the likelihood of human-mosquito contact. The virus undergoes an incubation period within the mosquito, known as the extrinsic incubation period, which lasts 8-12 days depending on environmental conditions such as temperature and humidity. Once infected, the mosquito remains capable of transmitting the virus for the remainder of its life. Climate factors significantly influence dengue transmission. High rainfall and humidity create ideal breeding conditions, while rising global temperatures have expanded the geographic

range of *Aedes* mosquitoes. Areas previously unaffected by dengue, such as parts of Europe and North America, are now reporting sporadic cases due to the migration of these vectors. Additionally, the increased frequency and intensity of extreme weather events, such as those caused by El Niño, have been linked to dengue outbreaks, particularly in regions with weak public health infrastructure (PAHO, 2024; WHO, 2023)

Vulnerable Populations and the Global Impact:

Dengue disproportionately affects vulnerable populations, particularly in low-income regions where healthcare systems are under-resourced. Children and the elderly are at heightened risk of severe dengue due to their weaker immune systems. Pregnant women are also a concern, as maternal transmission of dengue to the fetus, although rare, can result in complications such as preterm birth and low birth weight. Moreover, individuals with limited access to healthcare are more likely to suffer from delayed diagnosis and inadequate treatment, increasing the risk of severe outcomes (WHO, 2024).

A Washington Post on Brazil's Dengue Fever Crisis

Urbanization has intensified dengue's impact by creating densely populated areas with poor sanitation and inadequate waste management, conditions that allow mosquitoes to breed prolifically. For instance, unplanned urban areas often lack proper drainage systems, leading to water stagnation that serves as ideal breeding sites. In these environments, public health campaigns aimed at reducing mosquito breeding grounds face significant challenges due to limited community engagement and resources (PAHO, 2024).

Furthermore, international travel has played a significant role in dengue's global spread. Infected travelers can introduce the virus to non-endemic regions where *Aedes* mosquitoes are present, creating new transmission zones. This phenomenon underscores the need for coordinated global surveillance systems to track outbreaks and prevent further spread.

Global Overview of the Problem

The burden of dengue has reached unprecedented levels in recent years, with the WHO reporting over 7.6 million cases in 2024 alone. The Americas region has been particularly affected, accounting for a significant portion of global cases due to its favorable climate and rapid urbanization. In addition to the human toll, dengue outbreaks place immense strain on healthcare systems, diverting resources from other critical public health priorities. Economic productivity is also affected, as those infected are often unable to work during recovery, leading to significant financial losses for families and communities.

Historical Context: Dengue Outbreak

Over the years, organizations like the Pan American Health Organization (PAHO), the United Nations (UN), the World Health Organization (WHO), and the Organization of American States (OAS) have rolled out numerous initiatives to combat dengue outbreaks.

These efforts aimed to tackle the disease by focusing on mosquito control, improving healthcare systems, and raising public awareness. Despite these ambitious goals, many of these plans have struggled to make a lasting impact.

Some key initiatives from different international entities include:

1. PAHO's Integrated Management Strategy for Dengue Prevention and Control (IMS-Dengue): This plan focused on building better systems to monitor dengue, educating communities, and creating coordinated strategies to control mosquitoes. While it laid the groundwork for collaboration, inconsistent implementation and a lack of funding made it hard to sustain.
2. WHO's Global Vector Control Response (GVCR): Launched in 2017, this program aimed to cut down on mosquito-borne diseases like dengue by promoting sustainable practices like better environmental management and genetic mosquito control. However, adapting these approaches to local contexts, especially in lower-income areas, proved challenging.
3. UNICEF's Community-Centered Campaigns: These programs focused on empowering communities with knowledge to prevent dengue by eliminating mosquito breeding grounds. While they had some success, cultural barriers and weak community engagement limited their long-term effectiveness.
4. OAS Regional Cooperation Programs: The OAS worked on fostering better communication between countries to share data and respond to outbreaks. However, slow implementation and lack of coordination often meant that outbreaks spread unchecked.
5. PAHO's Dengue Vaccine Rollout: PAHO supported the development of Dengvaxia, the first dengue vaccine. Although it was a step forward, its limited effectiveness and strict eligibility criteria prevented it from reaching the populations most in need.

Despite these efforts, many plans fell short due to a combination of challenges. Countries struggled to work together, which led to delays in sharing outbreak data and coordinating responses. Funding was often inadequate and inconsistent, making it hard to maintain mosquito control programs or improve healthcare systems. Public health campaigns sometimes failed to resonate with local communities, as they didn't consider cultural contexts or the everyday realities people face.

Weak health infrastructure also made it difficult to track outbreaks or provide timely care. Heavy reliance on chemical insecticides caused mosquitoes to develop resistance, rendering some control measures ineffective. On top of this, vaccine development and distribution have been slow, leaving countries without reliable long-term solutions. Cultural beliefs and practices surrounding dengue have added another layer of complexity. In some places, dengue is viewed as an inevitable part of life, leading to complacency. Distrust in healthcare systems or skepticism toward solutions like vaccines

and insecticides has further complicated prevention efforts. Many people also rely on traditional remedies, which can delay proper treatment. Stigma and misinformation about the disease have made open discussions about prevention and treatment more difficult.

The way water is used and managed in many regions has also contributed to the spread of dengue. In areas where water access is unreliable, people often store it in open containers, creating perfect mosquito breeding grounds. Similarly, poorly maintained rainwater collection systems can turn into mosquito havens. Because water is so valuable in many communities, people are often reluctant to dispose of stagnant water, even when it poses health risks. There's also limited awareness of hidden mosquito breeding sites, like clogged drains or discarded containers.

Addressing these challenges requires a more inclusive approach, one that works directly with communities, respects cultural practices, and ensures resources are allocated to those who need them most. By combining better education, sustainable solutions, and stronger regional collaboration, the fight against dengue can take a significant step forward.

Essence of the Debate

The battle against dengue is essentially aggression brought about by the urgent need for collaboration among the countries in the region. Dengue cases are more pronounced and more complicated than before, thus making it necessary to prioritize prevention, act quickly in new cases, and use resources properly. Without cooperation among concomitant states, the pandemic will continue to fill the vacuum of non-coordinated responses; dissemination will occur further and quicker. The dilemma here is the means by which the use of local and international resources can be balanced. International organizations give consultancy services, fund the project, and come up with large-scale solutions; for example, the introduction of a vaccine and improved mosquito control techniques. Local governments and communities are the ones with the insightful data on the cultural and environmental facets that need to be considered before any strategy can be successful. None of these can obtain effective results if left alone, bridging both ends is a necessary condition. Also, it needs to be ensured that there is equity in the distribution of mosquito control programs and healthcare resources. Impoverished individuals who are the least able to defend themselves are most likely to suffer from dengue. It is the task of the strategy to ensure fairness, that is, the communities that are poor are not left out in the prevention campaigns or when life-saving treatments are always available.

Topics to be Discussed

Funding and Resource Allocation: The financial resources needed to combat dengue are substantial. The critical endeavor lies in the proper allocation of funds to a variety of programs having their respective degrees of productivity. How can countries and organizations ensure that resources are directed to the most effective programs, especially in areas with limited infrastructure?

Regional Collaboration: Dengue does not respect borders, so regional cooperation is vital. How can countries collaborate more effectively to share information, coordinate responses, and pool resources? Having a connection among the governments, international organizations, and local communities is the key to an effective and collective solution.

Public Health Education: Public awareness campaigns are a key part of prevention, but they need to be well-designed and culturally sensitive. How can health organizations ensure their messages reach communities in ways that are both understandable and actionable? Furthermore, what is the function of education in influencing changes in behaviors that are the root of the dengue problem?

Community Involvement: Local communities are at the forefront of dengue prevention efforts. How can these communities be empowered to take action? The success of mosquito control and prevention measures that are focused on promoting local engagement is vital for the long haul.

Vaccine Development: Developing an effective and widely accessible dengue vaccine is a critical priority. What progress has been made, and how can we ensure that vaccines are distributed fairly to those most at risk?

Environmental And Mosquito Control Measures:-Vector control is without argument most important in reducing the development of dengue. What are some of the strategies and methods countries can adopt in terms of long-term sustainable environmental management that will help in eradicating mosquito breeding grounds?

Health Inequity:--Vulnerable people with very little capability for healthcare have been the hardest hit by dengue. Thus, developing countries with little healthcare provision are

the most hardly affected. Which steps can be taken toward decreasing health inequality and ensuring that people at high risk get the appropriate care and protection?

Questions to answer

- How can this committee ensure that funds are utilized effectively to maximize impact on dengue prevention and treatment, particularly in the most affected regions?
- What are the most efficient methods for member states to share real-time information on dengue cases to prevent further spread?
- How can local communities and leaders be engaged in dengue prevention efforts, and what role should this committee play in supporting these educational initiatives?
- What steps can be taken to guarantee that mosquito control measures are accessible and effective for communities with varying levels of resources?
- What strategies can this committee implement to make a safe and effective dengue vaccine both accessible and affordable to vulnerable populations?

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