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| Forum: | The Economic and Social Council |
| Issue: | Limiting the spread of HIV and accelerating the research in prevention of the virus |
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| Position: | President |

Introduction

Claiming 35 million lives so far, HIV continues to be a major health issue, which affects everyone in the world both directly and indirectly. In 2015, about 1.1 million people died from HIV-related causes globally. With great efforts by national and international HIV programmes supported by civil society and a range of related partners, there have been some salient achievements internationally: Between 2000 and 2015, new HIV infections fell by 35%, AIDS-related deaths fell by 28% with some 8 million lives saved.

However, the absence of ultimate cure for HIV infection hinders the complete eradication of it, despite of innumerable attempts. HIV not only causes the costs in human lives, but also results in social and economic costs. Therefore, attempts have been made to prevent the global health issue. In this paper, I will explore some of those critical factors that have contributed to the cause of the virus, and international health organizations that have taken great measures to address the issue.

Definition of Key Terms

Human Immunodeficiency Virus, HIV

HIV is the virus that causes HIV infection. AIDS is the most advanced stage of HIV infection. HIV is spread through contact with the blood, semen, pre-seminal fluid, rectal fluids, vaginal fluids, or breast milk of a person infected with HIV. The use of HIV medicines to treat HIV infection is called antiretroviral therapy (ART).

Acquired Immunodeficiency Syndrome, AIDS

AIDS is the final stage of HIV infection, and not everyone who has HIV advances to this stage. AIDS is the stage of infection that occurs when one's immune system is badly damaged and become vulnerable to opportunistic infections. Without treatment, people who are diagnosed with AIDS typically survive about 3 years.

Antiretroviral Therapy, ART

Standard antiretroviral therapy consists of the combination of antiretroviral drugs to maximally suppress the HIV virus and stop the progression of HIV disease. ART also prevents onward transmission of HIV. Huge reductions have been seen in rates of death and infections when use is made of a potent ARV regimen, particularly in early stages of the disease.

CD4 count

A CD4 count is a lab test that measures the number of CD4 cells in a sample blood. In people with HIV, it is the most important laboratory indicator of the working of immune system and the strongest predictor of HIV progression.

Key Issues

Stigma and discrimination

HIV-related stigma and discrimination refers to prejudice, negative attitudes and abuse directed at people living with HIV and AIDS. The consequences of stigma and discrimination are wide-ranging. Some people are shunned by family, peers and the wider community, while others face poor treatment in healthcare and educational settings, erosion of their human rights, and psychological damage. These all limit access to HIV testing, treatment and other HIV services.

Homophobia

Homophobia is "the irrational hatred, intolerance, and fear" of lesbian, gay, bisexual and transgender (LGBT) people. The global HIV and AIDS epidemic has always been closely linked with negative attitudes towards LGBT people, especially men who have sex with men (MSM); a group that is particularly affected by HIV and AIDS.

At the beginning of the HIV and AIDS epidemic, MSM in many countries were frequently singled out for abuse as they were seen to be responsible for the transmission of HIV. In many countries, stigma and discrimination prevent LGBT people from accessing vital

HIV prevention, testing, and treatment and care services. This means that many people are unknowingly living with HIV, or being diagnosed late when HIV is harder to treat.

Gender inequality

Worldwide, women constitute more than half of all people living with HIV. Despite the availability of antiretroviral treatment (ART), AIDS-related illnesses remain the leading cause of death among African women of reproductive age. HIV disproportionately affects women and adolescent girls because of their unequal cultural, social, and economic status in society. This limits women's choices, opportunities and access to information, health and social services, education and employment.

Unemployment and reduction in working population

Remaining in an employment is significant to people with HIV as it is generally associated with better quality of life and how individuals see themselves and their place in the world. Nonetheless, disclosure of HIV status and fears of discrimination tend to be major concerns for people in employment.

The costs that individuals should endure also affect society as well with decreased working population, resulting in increase in dependent population in a country. The burden levied on the country increases and the government should spend their revenue on welfare benefits or health services. Also, the country may experience contraction in their economy.

Major Parties Involved

UNAIDS

Since 1996, the UN's efforts to combat HIV/AIDS in developing nations have been coordinated by UNAIDS. The Programme is co-sponsored by 10 UN system agencies: UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, the ILO, UNESCO, WHO and the World Bank.

WHO

WHO works closely with the United Nations system to support its Member States in achieving their national priorities and ensuring better health outcomes. WHO collaborates with the UN system to position health in the debates and decisions of UN intergovernmental bodies.

With the WHO Department of HIV/AIDS, WHO is currently working on the Global Hepatitis Programme, which contains: HIV Treatment and Care, Key Populations and

Prevention, Technologies and Commodities, Strategic Information and Planning, and Programme Development and Implementation.

Sub-Saharan Africa

Sub-Saharan Africa is the most affected region, with 25.6 million people living with HIV in 2015. Also sub-Saharan Africa accounts for two-thirds of the global total of new HIV infections.

Timeline of Relevant Resolutions, Treaties and Events

| Date | Description of Event |
|--------------------|--|
| 17 July, 2000 | Resolution 1308, on HIV/AIDS and International Peace-keeping Operations, was adopted by the Security Council |
| September, 2000 | The United Nations Millennium Development Goals were set, which contained a goal to combat HIV/AIDS and other diseases |
| 2 August, 2001 | Declaration of Commitment on HIV/AIDS was adopted in the special session of Heads of State and Government |
| 15 June, 2006 | Political Declaration on HIV/AIDS was adopted by the High-level meeting in the General Assembly |
| 4 January, 2010 | US President Barack Obama announced the end of the 22-year policy prohibiting people living with HIV from travelling and emigrating to the USA. |
| 7 June, 2011 | Resolution 1983 was adopted by the Security Council |
| August, 2011 | The United States Food and Drugs Administration approved a new HIV treatment, known as Complera, designed to be taken as a single daily tablet. |
| 30 September, 2015 | The World Health Organization published new guidelines recommending that anyone infected with HIV should begin antiretroviral treatment as soon after diagnosis as possible. This recommendation responded to findings from clinical trials confirming that early use of antiretrovirals kept people living with HIV healthier and reduced the risk of transmitting the virus to others. |

Previous Attempts to Solve the Issue

One attempt was **Millennium Development Goal 6**, which was to combat HIV/AIDS, Malaria and other diseases. The targets were to halt and begin to reverse the spread of HIV/AIDS by 2015 and achieve universal access to treatment for HIV/AIDS for all those who need it by 2010. In July 2015, UNAIDS announced that the targets for Millennium Development Goal 6 have been achieved and exceeded 9 months ahead of the schedule set in 2000. New HIV infections fell by approximately 40 per cent between 2000 and 2013. There has been a significant improvement in accessibility of treatment as well. In 2013 alone, the number of people receiving ART rose by 1.9 million in the developing regions.

Also, WHO implemented the **Global Health Sector Strategy on HIV/AIDS for 2011-2015**, which guided the health sector's response to HIV. Its goals were:

- To achieve universal access to HIV prevention, diagnosis, treatment and care interventions for all in need.
- To contribute to achieving health-related Millennium Development Goals and their associated targets by 2015.

At the same time, UNAIDS also implemented its 2011-2015 Strategy, **Getting to Zero**. Adopted by the Programme Coordinating Board in December 2010, the strategy worked to position the HIV response in the new global environment. Its aims were:

- To advance global progress in achieving country set targets for universal access to HIV prevention, treatment, care and support
- To halt and reverse the spread of HIV and contribute to the achievement of the Millennium Development goals by 2015.

Possible Solution

Sustained global investment

Sustained global investment is needed to ensure people most in need have access to life-saving HIV services. Investing in the AIDS response is a shared responsibility. The global investment can be achieved by collaboration of different international organisations. Close planning and monitoring usages are required in order for effective use of the fund. Also, the procedure of raising and using investment should be as transparent as possible.

Rapid HIV testing

Rapid HIV testing is a highly important factor that is absolutely necessary to prevent the proliferation of HIV/AIDS. In order to rapidly test for HIV/AIDS new machinery or improvements in current machinery are needed. With rapid diagnostic HIV testing, time will be saved to check up each and every patient, and preventative methods can be quickly addressed. An enhanced diagnostic HIV testing also concludes more reliable results that can be used and end lack of rigorous evaluation.

Education

Furthermore, it is important to improve education on HIV and AIDS. Comprehensive HIV and sex education programs are needed, which should address a wide range of people. For more effective education, different materials can be prepared for different age groups. The education can be funded and provided in by governments, which can also take responsible on enhancing different strategies that are complied with cultural and national beliefs. Raising awareness of issues, consequences and practical solutions is a key to prevent further infection.

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