



Committee: Human Rights Council

Issue: Challenges to successful implementation of HIV and AIDS-related health policies

Student Officer: Mariana Colmenares

Position: President

INTRODUCTION

Over the past years the HIV/AIDS epidemic has been moderately under control, when comparing it to the initial years of the spread of the disease. Beginning with various cases related to immunodeficiency, many patients began to report similar conditions within short intervals of each other. Many of these cases were later discovered to have an immunodeficiency virus in common, here began the HIV pandemic. The disease was new to medical facilities and governments alike, and meanwhile new treatments were being developed, nations met to discuss the most efficient ways to tackle the issue as it grew in global context.

HIV, Human Immunodeficiency Virus, is a disease that affects the body's capabilities to fend off other viruses and bacteria. Without treatment or proper care the virus can further develop and become extremely dangerous for the individual affected, as they have little to no capability to protect their body. This is where AIDS, Acquired Immune Deficiency Syndrome, ties in. AIDS is also known as advanced HIV, where the symptoms reach their latest stage and become more for the patient to deal with.

The implementation of policies and medical regulations for HIV and AIDS face various challenges mostly surrounding education, as well as accessibility. While relying on economic support to manage the necessary infrastructure and crucial treatment facilities and research areas.

DEFINITION OF KEY TERMS

HIV

HIV stands for Human Immunodeficiency Virus, a disease that attacks the body's immune system. Without treatment, HIV will continue to destroy the cells making up the immune system and will make it harder for the individual hosting the virus to fend against other viruses and illnesses.

Antiretroviral Treatment

The antiretroviral treatment (ART) is considered the main and most effective form of treatment for individuals living with HIV. ART is also safe for young children and it is recommended for minors to follow specific courses of treatment to achieve a fulfilling life even with their illness.

AIDS

Acquired Immune deficiency Syndrome(AIDS) is a set of symptoms that manifests as a consequence of the HIV virus. With the development of HIV treatment, less people develop AIDS (which is also known as late stage HIV).

Drug Resistance

When talking about HIV/AIDS taking the required treatment as directed is highly important. If not done so an individual may develop drug resistance, meaning the virus will become immune to the drugs and thus the medication will be unable to control the disease.

Prevalence

Population percentage infected with a certain disease or virus.

Stigma

Prejudice or discrimination. When discussing this issue many HIV positive individuals face stigma in their everyday lives, decreasing their well being and affecting their lifestyle. Stigma is very present in the lives of the HIV positive population, and a struggle they face on a daily basis due to the beliefs of the community they reside in.

BACKGROUND INFORMATION

‘Introduced’ in the 1980s, HIV/AIDS spread fast, and required mass medical advance to treat and care for the disease. The prevalence of the disease peaked at the start, with numerous new infections and later bringing on an increase in the number of deaths related to the medical condition around 2004. HIV/AIDS became the center of attention of various organizations, with the fast spreading epidemic and a need to tackle it due to the effect it was having on the population and the wellbeing of various international regions.

Through the implementation of differing policies and various steps to decrease the risk for the disease, HIV/AIDS death rate has drastically decreased, and are now not considered to hold major mortality risks. Many aim to continue to improve the situation surrounding the disease and the implementation of health regulations is crucial in order to end the toll of the epidemic on the international population.

Individuals with HIV/AIDS also suffer from discrimination, and spreading awareness is crucial to combat the stigma against the affected populations. Aside from taking a toll of their lifestyle, stigma decreases the sense of security, and makes it less likely for individuals to get tested in fear of discrimination from their colleagues or acquaintances. Because early detection is key to eradicate the pandemic, it is necessary to work on obtaining a zero-discrimination society worldwide.

Education

Education is often used to tackle many medical aspects especially if the spread of said disease is one that can be prevented or avoided. In the case of HIV and AIDS this doesn’t only include broad education on the disease, but also sexual education, due to the fact that the spread is closely related to such aspects. According to the United Nations Population Fund (UNFPA) statistics show that majority of adolescents around the globe lack sufficient information in order to make decisions regarding their sexuality and reproductive health.

CGS MUN

However, when discussing the topic of sexual education in a transnational aspect many controversies become part of the assessment of such programmes. Religion is one of the biggest factors that play into providing sexual education, as it is considered taboo by many individuals who practice or identify with certain religions. Even in secular states, religion is often a big problem. Where the population, influenced by religious and cultural beliefs stand against public sexual education for their children and minors of the country.

Another barrier when looking to provide global education to prevent is the accessibility of the information that needs to be shared. Many countries face everyday challenges with their educational systems especially in rural areas. Countries that lack infrastructure make it even harder for those living in other regions to commute somewhere where they can seek the information they need.

Global Spread

The HIV/AIDS pandemic came on fairly quickly, and with its dissemination moving faster than medical knowledge it became incredibly hard to avoid international circulation. Now more controlled, the disease still takes a toll on various international regions, and the issue will continue to be

considered a transnational matter until the end of the epidemic.

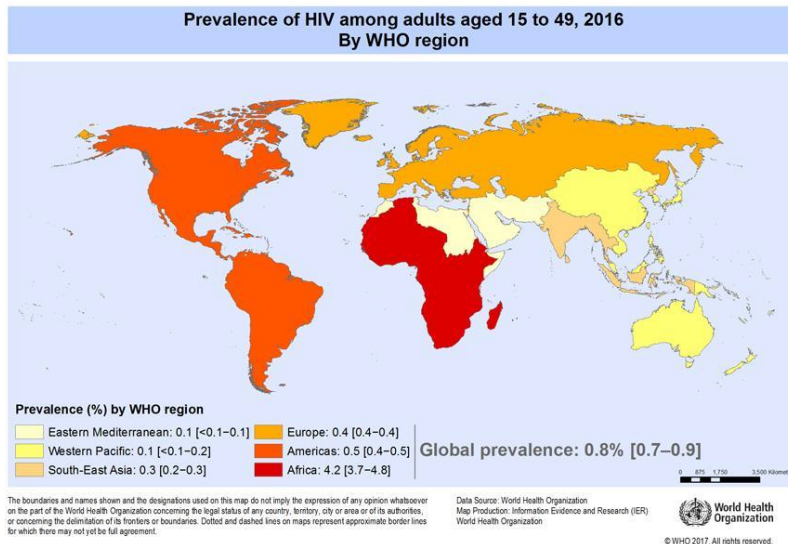


Figure 2: regional map showing the prevalence of HIV

The initial option that many countries turned to when the continental spread of the disease was observed was travel bans. Before much was known about the disease, it became clear that it depended on human contact to be contagious. With this information various nations, such as the US, decided to implement travel bans on HIV positive individuals until more was known on the medical condition or the prevalence of the disease decreased.

Economic involvement

Due to the high demand of treatment and education facilities to tackle this issue as a whole economic power plays a pivotal role in a countries ability to address the issue and implement regulations and policies successfully. According to data (such as shown in figure 2) Africa is one of the regions most affected by the spread of HIV/AIDS, with countries such as South Africa, Ethiopia, and Nigeria, with alarmingly high statistics surrounding deaths related to the condition.

This ties in directly to the economic ability and infrastructure that is available for use within the period of time in discussion when trying to approach the issue. An UN press release from June 2001 states “In the 10



countries most severely affected by AIDS, per capita health expenditure ranges from \$3 to \$246.”, pointing out a direct link with the effect of the disease and the economic capabilities of the nation to address it. “Health-care systems cannot cope with the demands of HIV/AIDS, and countries most affected by the disease are generally least able to pay for prevention and treatment.”

Medical Development

HIV/AIDS were finally identified as a disease in 1982 after many reported cases of immune deficiency which appeared to have a common underlying cause. Throughout the 1980s new medical techniques were explored to aid in the detection of the disease in HIV positive individuals.

With its initial appearance many seemed to believe that HIV was a disease that affected only certain groups of people, thus grew the stigma associated with the disease. The first cases were most commonly presented in gay men as well as sex workers, this seemed to promote a connection in society’s eyes linking HIV/AIDS to actions that at the time were considered shameful. With medical development on its way, it was publicized that many of these beliefs were actually misconceptions but the stigma still remains prevalent in many communities. Social awareness and various movements also played a roll in combatting stigma against HIV/AIDS, as actions that don’t align with heterosexual norms are becoming more normalized and are no longer shamed by the public.

Although it has no cure, HIV rates have decreased immensely since the introduction and proper guidance of the usage of antiretroviral medication. Medical trials for this type of medication to treat the disease began in 1985, and have since then developed immensely.

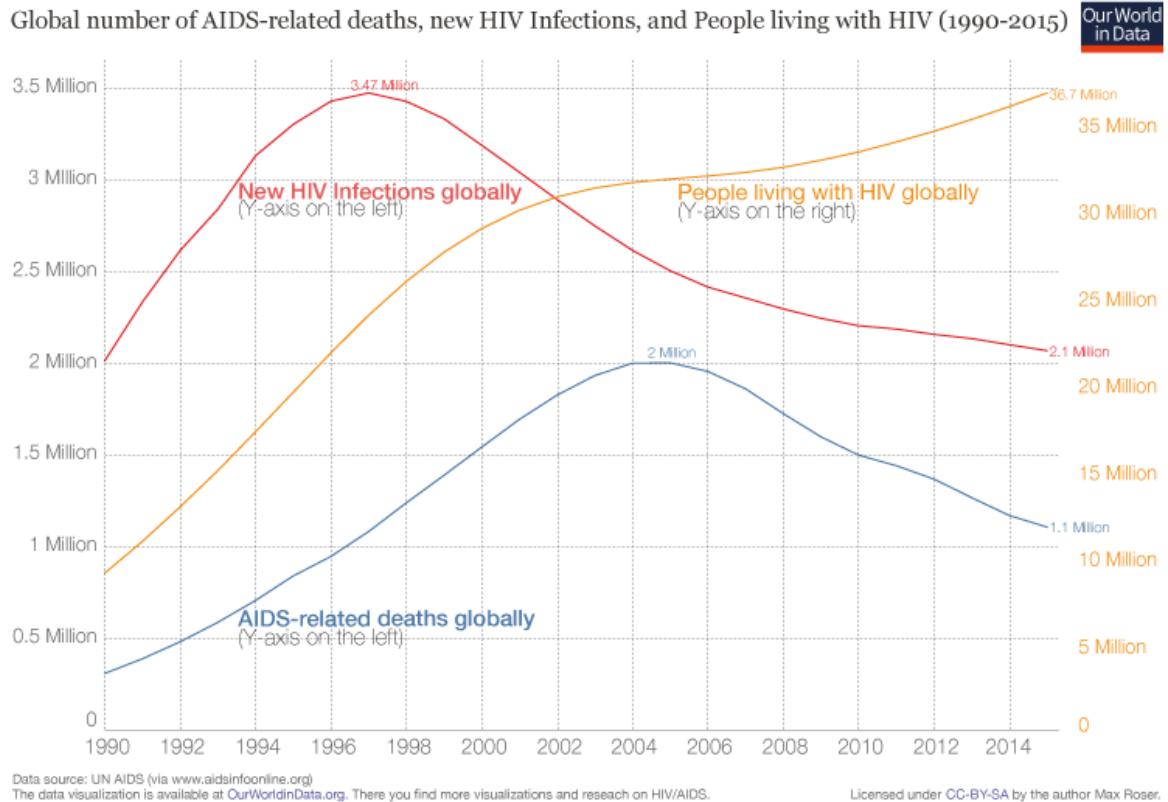


Figure 1: (Roser & Ritchie) global graph showing correlation between new infections, number of deaths, and people living with the disease.

Numbers show that after peaking through the years of 1996-1998 the number of new HIV infections has drastically decreased. The same applies to the number of deaths related to HIV and AIDS, which began to decrease with the expenditure of modern medicine and increased accessibility for medical treatment of the type.

Another important medical development is directly related to the transmission of the disease through sexual activity. After years of research HIV treatment progressed, and meds advertised as pre-exposure prophylaxis were introduced. These medications served the purpose of protecting HIV negative individuals from being infected by their sexual partner if the necessary precautions were taken. Many consider that the diffusion of these medications



are the reason the number of new infections decreased and have managed to stay in the lower range year after year.

MAJOR COUNTRIES AND ORGANISATIONS INVOLVED

United States

Greatly involved in the issue the US doesn't have alarmingly high rates of individuals affected by the disease when in comparison to other nations. However, the FDA (Food and Drug Administration) and CDC (Centers for Disease Control and prevention), along with various other medical companies and organizations centered in the country are very involved in the issue in regards to treatment, care, and awareness. Furthermore, the US tackles the aspect of discrimination with the Americans with Disabilities Act (ADA), which prohibits discrimination towards any person with a disability, and includes those living with HIV and AIDS. The US has also been highly involved in the issue beginning in its starting phases, as early as 1993 holding congress discussions on border control and travel bans (a restriction that was only lifted in 2010).

South Africa

South Africa is still one of the countries most affected by the pandemic, as it was in the initial years, and links directly to the lack of economic basis to pay for the necessary treatment facilities and other aspects. Along with other nations, the african continent has one of the highest prevalence of the disease much like south africa represents.

Nigeria

Nigeria had 160.000 AIDS related deaths in 2016 only. With an incredibly high and disproportionate prevalence, HIV/AIDS affects mostly sex workers, drug users, and gay men. Considered a fast track country, Nigeria aims to have zero new infections, zero deaths related to the disease, and zero discrimination, guided by the national strategic framework (2017-2021).

Panama



With a high prevalence of the disease and increasing death rates, the key populations affected by HIV in Panama are sex workers and prisoners. In an attempt to increase the numbers of affected individuals receiving treatment (54%) the ministry has provided free HIV treatment for all since 2016. A national campaign has been launched (2015) to incentivize testing, which is now free for pregnant women, adolescents, and other key population groups.

Germany

Along with the rest of western Europe, Germany has relatively high prevalence. However, the main challenge in the country isn't new infections or percentage of adults receiving treatment. The major obstacle in Germany is late detection, with 28% of the affected population having received a late diagnosis.

World Health Organization (WHO)

Accountable for majority of the UN involvement in the issue, WHO aims to provide care to affected individuals, and in conjunction with UNDP provide aid to nations where the epidemic is most prevalent. WHO also updates data regarding the issue frequently, and has become a reliable index measuring various aspects of the pandemic.

United Nations Development Programme (UNDP)

UNDP provides the global population with a set of 17 sustainable development goals. Within these, goal three targets the end of recent epidemics, and lists AIDS as one of the diseases to focus on.

Joint United Nations Programme on HIV/AIDS (UNAIDS)

With the combatting of AIDS/HIV related diseases being in the core of the UN's goals, the UNAIDS is currently leading such efforts. Despite having the African region as the hotspot of its actions, the UNAIDS raises awareness and distributes medical supplies to an array of different regions, including Eastern Europe, Asia, and the Middle East.

TIMELINE OF EVENTS

| Date | Description of Event |
|--------------------------------|---|
| November 1983 | World Health Organization (WHO) held meeting to assess global situation regarding AIDS and began applying international surveillance (“History of HIV and AIDS Overview.”). |
| April 1989 | First international AIDS conference |
| 1988 | WHO declares December 1st as the first World AIDS Day |
| September 18th, 1989 | United States National Commission on AIDS (created by the US congress) meets for the first time |
| October 1990 | FDA approved use of AZT to treat children affected by AIDS |
| May 1992 | FDA licensed a testing kit to be used by medical professionals to detect HIV-1 |
| 1996 | Joint United Nations Programme on AIDS (UNAIDS) was established. |
| 1997 | Highly Active Antiretroviral Therapy (HAART) becomes the new standard treatment for HIV care |
| June 2001 | UN General Assembly calls for the creation of a global fund to support efforts to combat the spread of HIV. |
| January 2005 | World economic Forum approves a set of priorities, one of them focuses on addressing HIV and AIDS in africa and other regions deeply affected. |
| January 4 th , 2010 | US government lifts immigration/travel ban on HIV positive individuals. |
| 2012 | PrEP for HIV negative individuals is approved to prevent sexual transmission of the disease |

CGS MUN

| | |
|-----------|---|
| July 2016 | It is announced by UNAIDS that the Millennium Development Goal regarding HIV/AIDS had been reached ahead of schedule. |
|-----------|---|

UN INVOLVEMENT: RELEVANT RESOLUTIONS, TREATIES AND EVENTS

The UN has been involved in the issue surrounding HIV and AIDS in various aspects, ranging from goals of improvement and medical care for affected individuals. The major aspect in which the UN is involved is through the World Health Organization (WHO). WHO has focused not only on the attempts to spread awareness and medical care, but is also a center for reliable information on the statistics of the disease world wide.

The United Nations Development Programme (UNDP) has also directly addressed the issue of HIV and AIDS through their sustainable development goals. More specifically, goal 3 is good health and global well-being. Within this category lies the target of goal three which states that by 2030 the UNDP aims to end the AIDS epidemic, amongst other diseases. Since work on this goal started the UN records that new HIV/AIDS infections decreased by 30% throughout 2000-2013.

- [Security council resolution 1308 \(July 2000\)](#)
- [GA Declaration of Commitment on HIV/AIDS](#) : Declaration made by the UN General Assembly (August 2001) committing to the responsibility of awareness and recognizing the epidemic as a pressing matter.
- [Security council resolution 1983 \(June 2011\)](#)
- **POSSIBLE SOLUTIONS**

The major obstacles to the eradication of the spread of HIV/AIDS relate back to economic dependence, as well as distribution of education and resources. In order to successfully implement policies to tackle the disease

CGS MUN

data collection must be frequently updated, making it possible to identify regions that require more aid in comparison to others.

Furthermore, informing the population not only on the disease itself but on sexual education topics in order to address the prevention of the spread of HIV through that manner. Additionally, it is necessary to consider the need for accessible education facilities and increased infrastructure to do so. As well as mass media campaigns to reach a higher percentage of the population through the spread of information.

It would be up to the committee's discretion to create a system to regulate fund allocation of international organizations dealing with the issues, as well as consider the subsidizing for the funding of initiatives in countries that don't withhold enough monetary capital to do it independently.

It is also crucial to not only implement laws protecting HIV positive individuals from stigma and discrimination, but to enforce said regulations by the means of mass campaigns and awareness tactics. This circles back to medical facilities, where unbiased treatment should be granted to every patient, and where standardized treatment should be established and implemented. Thus, the committee should discuss the topic of organ transplants and similar courses of treatment for patients suffering from HIV/AIDS whether or not the issue is caused by the disease itself, as this is a point of discrepancy between many nations and an international consensus is not present at the moment.

BIBLIOGRAPHY

“Antiretroviral Treatment for Children Living with HIV.” *AVERT*, Avert, 17 Apr. 2018, www.avert.org/living-with-hiv/treatment-children.



Broder, Samuel. "The Development of Antiretroviral Therapy and Its Impact on the HIV-1/AIDS Pandemic." *Ncbi*, U.S. National Library of Medicine, Jan. 2010, www.ncbi.nlm.nih.gov/pmc/articles/PMC2815149/.

"Combination HIV Prevention:A UNAIDS Discussion Paper." *Unaids.org*, United Nations, files.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/20111110_JC2007_Combination_Prevention_paper_en.pdf+

"COUNTRIES MOST AFFECTED BY HIV/AIDS ARE LEAST ABLE TO PAY FOR PREVENTION AND TREATMENT | Meetings Coverage and Press Releases." *United Nations*, United Nations, 11 June 2001, www.un.org/press/en/2001/aids18.doc.htm.

"Germany." *UNAIDS*, 25 Oct. 2017, www.unaids.org/en/regionscountries/countries/germany.

"Global Health Observatory (GHO) Data." *World Health Organization*, World Health Organization, 2 Mar. 2018, www.who.int/gho/hiv/en/.

"HIV/AIDS | HIV | HIV Symptoms | AIDS." *MedlinePlus*, U.S. National Library of Medicine, 4 June 2018, medlineplus.gov/hivaids.html.

"History of AIDS." *History.com*, A&E Television Networks, 2017, www.history.com/topics/history-of-aids.

"History of HIV and AIDS Overview." *AVERT*, Avert, 9 Mar. 2018, www.avert.org/professionals/history-hiv-aids/overview.

“HIV & AIDS Glossary.” *AVERT*, Avert, 5 June 2017, www.avert.org/about-hiv-aids/glossary.

“HIV and AIDS in W & C Europe & N America Regional Overview.” *AVERT*, Avert, 26 Mar. 2018, www.avert.org/professionals/hiv-around-world/western-central-europe-north-america/overview.

Mandal, Ananya. “History of AIDS.” *News-Medical.net*, News-Medical.net, 2 Feb. 2014, www.news-medical.net/health/History-of-AIDS.aspxhttp://www.theaidsinstitute.org/node/259.

Max Roser and Hannah Ritchie (2018) - "HIV / AIDS". *Published online at OurWorldInData.org*. Retrieved from: 'https://ourworldindata.org/hiv-aids' [Online Resource]

“Nigeria.” *UNAIDS*, United Nations , 26 Mar. 2018, www.unaids.org/en/regionscountries/countries/nigeria.

“Sexuality Education.” *Advocatesforyouth.org*, www.advocatesforyouth.org/publications/publications-a-z/2390-sexuality-education.

“Universal Antibody Drug for HIV-1 Prevention and Immunotherapy.” *ScienceDaily*, ScienceDaily, 7 May 2018, www.sciencedaily.com/releases/2018/05/180507111840.htm.



“What Are HIV and AIDS?” AVERT, Avert, 29 May 2018, www.avert.org/about-hiv-aids/what-hiv-aids.