



UNICEF: HIV/AIDS in Children

Hello! My name is Cynthia Leong and I am your head chair for the upcoming 34th Annual MVHS MUN conference. I am currently a junior, and this is my first year participating in the MUN program. Nonetheless, I have been to a few conferences locally and will be attending the BMUN (UC Berkeley) conference later in March. In school, I am a part of CSF, Key Club, NHS, Science Olympiad, and many more but it would be too boring to read the whole list so I'll just stop there. Outside of school, however, I truly appreciate any extra nap time I can get, and if I'm not sleeping, you can catch me hanging out with my friends at the beach or cramming in last minute volunteer hours and homework. I love the color blue, or any color for that matter, and enjoy going to Denny's in the middle of the night because there's no bad time to get pancakes. Anyways, I really hope your experience at our conference will be a great one! I am looking forward to meeting all of you very soon.

I. Background

As of the end of 2015, there were approximately 2.6 million children living with HIV/AIDS. Although the numbers have decreased in the new century, about 700 children are being infected every day. Many of the kids who contracted the disease got it from their mothers during childbirth, breastfeeding, and pregnancy. Also, cultural norms such as marrying at an early age lead to children becoming sexually active sooner. As a result, they have a higher risk or being infected from an older partner, through coerced sex, and from a decreased rate of condom use. Injection drugs also have a risk of contracting HIV/AIDS. Children begin to do this as early as the age of 10, who are not aware of the effects of sharing needles or the harm reduction services provided to help with diseases like this. Needles that have not been sterilized and have an infected person's blood on it are a danger not only to drug users, but also in unsanitary medical offices. In poor areas with limited resources in healthcare, medical practitioners often do not sterilize their equipment and continue to use it on person to person, giving the illness to many people at a time. If this disease is left untreated, symptoms include a weak immune system, strain on the heart, eating problems, and aches and pains among many others. Although the illness alone cannot kill you, the other diseases and health problems that come with a weak immune system can. Even though the numbers have gone down, only one third of children under 15 years of age are getting treatment to stop the virus.

II. UN Involvement

One of the main programs established to end HIV/AIDS in children is the "Joint United Nations Programme on HIV/AIDS," also known as UNAIDS. Established in 1994 as part of a resolution, then launched in 1996, its mission is to prevent the transmission of the virus, provide care and resources for those who have already been infected with it, and decreasing the vulnerability of individuals to HIV. With its headquarters in Geneva, Switzerland, the secretariats of UNAIDS work in more than 80 countries around the world. Additionally, the World Health Organization (WHO) is responsible for leadership on global health matters, including HIV/AIDS. In this department, they provide support, care, and prevention services worldwide to ensure a





sustainable response to the virus as well as drugs to treat it. UNESCO is also a cosponsor of UNAIDS. They support those in areas with a high vulnerability to HIV, as well as younger people in school settings. Some other cosponsors are UNICEF, United Nations Development Program (UNDP), and United Nations Educational, Scientific and Cultural Organization (UNESCO).

III. Possible Solutions

One of the main previous solutions to children's HIV/AIDS is named "Getting to Zero." In 2015, both UNICEF and UNAIDS made a pledge to have zero new cases break out. One of UNICEF's programs, Unite for Children, Unite against AIDS, strives to meet two goals: 1) to reduce the number of people infected by 90%; and 2) to reduce new infections among young people (children 15-19) by 50%. This resolution should be extended until the problem at hand has been decreased significantly. Education is an important factor in attempting to reduce the spread of the disease. Everyone, but mainly children, should be taught about how it is contracted and how it affects the body. The education can be done through non-profit organizations like Doctors Without Borders which will help countries get the help they need without having to use up all of their financial supplies. The program can also help treat already infected children around the world. By continuing to use the "Getting to Zero" plan by implementing programs around the world, a decreased rate of HIV/AIDS may be achieved.

IV. Country Bloc Positions

<u>Western:</u> The western world is growing increasingly complacent about AIDS. Although many people see it as an issue, it does not affect enough people to require further action.

<u>African</u>: Africa is truly the hardest hit by the AIDS epidemic. This bloc is also comprised mainly of impoverished nations, so they have the highest infection rate.

<u>Middle East:</u> The countries in this bloc are facing some culturally sensitive issues. Their cultural preservation and the health of their populace are not mutually exclusive.

<u>Eastern/Latin America</u>: Both the Eastern bloc and the Latin American bloc are faced with a growing infection rate, although it is nowhere near the rate of Africa. They need help with education and prevention.

Asia/Pacific: The Asian bloc is facing a similar problem to the Latin American bloc, but with more of a problem surrounding the sex trade. Many young people in countries such as Thailand are not only infected as a result of this but are also helping to spread the disease because they are mistakenly told that young prostitutes are less likely to be infected.





V. Questions to Consider

- 1. What are the immediate issues in your country leading to increased susceptibility of HIV/AIDS?
- 2. Is your country secluded in any way that prevents receiving help from organizations?
- 3. Are there any previous resolutions that can be revised to fit the needs of your country?
- 4. How is your country being affected by HIV/AIDS?
- 5. Has your country contributed to the efforts to stop the disease?

VI. Works Cited

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