



WHO: Sexually Transmitted Infections

Greetings, delegates! My name is Joshua Liao and I'm going to be your vice chair for the 2017 MVHSMUN Conference. This year is my first official year in MUN at Mission, however I've done MUN before in middle school attending high school level conferences. I've been to several conferences such as Laguna, SOCOMUN, and Tustin as a middle schooler and in this year, winning several awards in the process. At Mission, I am a leader of a service club, co-chair in the MVHS orchestra, and also an AP/IB student. In my free time, I like to have jam sessions with my friends, enjoy playing video games, or learning choreos when I have time. I'm excited to help with WHO this year and meet you all at the conference! Email any questions and your position papers to mvhsmunwho@gmail.com.

I. Background

Sexually Transmitted Infections (STI) are infections caused by over thirty possible kinds of bacteria, viruses, and parasites that are transmitted through sexual contact. Eight of the thirty pathogens commonly lead to sexually transmitted diseases, with four of these infections being curable (syphilis, gonorrhoea, chlamydia and trichomoniasis). However, the remaining four (hepatitis B, herpes simplex virus (HSV or herpes), human papillomavirus (HPV), and HIV) are currently incurable. Every day more than 1 million of these infections are transmitted. The issue with STIs goes beyond the immediate effects of the infections as they can cause an increase in the risk of HIV, an increase in birth defects, and a greater risk of cervical cancer and infertility in women. For example, in 2012 over 900,000 pregnant women worldwide became infected with syphilis, resulting in 350,000 of their children to be born with adverse birth outcomes including death. Aside from the danger they can present to pregnant women, some STI's can triple the risk of developing HIV. This is especially concerning in areas such as Africa where HIV can go unnoticed for years, resulting in the development of AIDS as soon as 10 to 15 years after HIV is developed. The spread of many of the infections, especially in the areas such as Africa, results from drug resistant infections and ease of transmission. Genital herpes simplex virus, for example, affects an estimated 500 million people worldwide, a number larger than the population of the United State, Canada, and Mexico combined, providing evidence of the truly terrifying scale of the infections.

II. Past UN Involvement

The World Health Organization has begun to employ a combination of improved vaccines, an increase in the education and promotion of sexual health, and more testing and monitoring for STIs, especially in pregnant women. It was not until recently that the United Nations took action against STIs. WHO has only recently adopted a strategy on sexually transmitted infections that is effective from 2016-2021. The efforts of WHO are focused on screening for STIs and increasing the availability and the quality of treatments for STIs, particularly drug-resistant gonorrhea.



III. Possible Solutions

The issue of STIs stems from a combination of lack of medical care, lack of education on sexual health, and simply the natural unavoidable sexual transmission of pathogens. The goal of WHO is to work with countries to help provide the medical care and education to areas in need which will lower the number of infections acquired over time. Along with these efforts, new medical advancements are necessary to attack the infections in a quick and efficient manner. If current medical treatments and all future advancements in the field are made available to all regions, the number of cases of STIs each year will dramatically decrease.

IV. Country Bloc Positions

Western: Western ideas for solving the issue of STI's relies on providing help to countries in need through education and medical care. Western goals are to reduce the number of cases as much as possible.

Latin: The goals in Latin countries is similar to that of western countries but they lack the funds to make a noticeable impact on the situation.

Middle Eastern: The views in the middle east on STI's is less than helpful as terrorist regimes and tyrannical governments continue to grip the region, preventing any significant work from being completed there.

Asian: Asian ideas are similar to those of the west in some areas, but many poor regions exist where there is not enough funds or widespread interest to make any advancements towards reducing the STI rate.

African: Africa has an incredibly high STD and STI rate yet has the weakest economies and worst human conditions. Many areas in Africa lack even the basics like food and water and thus disease plagues many peoples who can't do anything to fight back.

V. Guiding Questions

1. What can be done to prevent the further spread of STI's in developing countries?
2. Where would funding for any projects come from?
3. Where is the most help needed and why?
4. What can be done to prevent spread in already developed countries?

VI. Works Cited

<http://www.who.int/mediacentre/factsheets/fs110/en/>

<https://www.womenshealth.gov/publications/our-publications/fact-sheet/sexually-transmitted-infections.html>

http://www.who.int/hiv/strategy2016-2021/GHSS_Mission_Briefing_December_2015.pdf