

HIV and Tuberculosis

Topic Overview:

Today delegates will discuss methods to disseminate public health information that enables policy makers to be more effective in preventing HIV and Tuberculosis. The World Health Organization aims to improve health especially among disadvantaged populations.

The World Health Organization estimated that **in 2016, 374,000 people who had both TB and HIV have died**. This is in addition to the **1.3 million people who died from TB alone**. In total an estimated **1.2 million people died of HIV infection in 2014**. Those people who have HIV and TB co-infection when they die, are internationally reported as having died of HIV infection.

Global Impact:

	Total TB Mortality	0-14 years	Adult Males	Adult Females	Population
Africa	320,000	43,000	177,000	100,000	989,000,000
America.	6,200	1,860	2,900	1,500	991,000,000
Mediterranean	3,000	470	1,400	1,100	648,000,000
Europe	5,100	860	3,000	1,200	910,000,000
South-East Asia	35,000	2,600	20,000	9,900	1,930,000,000
Western Pacific	5,000	1,710	2,200	1,000	1,860,000,000
Global Total	374,000	52,000.	207,000	115,000	7,320,000,000

The WHO African Region accounted for 86% of these deaths

Globally in 2015, 55% of notified TB patients had a documented HIV test result. In the African region where the burden of HIV associated TB is highest, 81% of TB patients had a documented HIV test result.

Action Already Taken:

-On December 7, 2018, The World Health Organization (WHO) and Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), together with PEPFAR, UNAIDS, the World Council of Churches – Ecumenical Advocacy Alliance, and global partner organizations, **issued a strong call today to accelerate children’s access to effective HIV diagnostics and medicines** and to end paediatric AIDS.

At the meeting, global partners recognized tangible progress made over the past year, in the context of persisting challenges in paediatric HIV. They identified key barriers that exist and agreed on actions to be jointly undertaken in order to **improve timely diagnosis of HIV among children and to increase their access to optimal antiretroviral treatment (ART)**.

They committed to **expand use of new, more effective strategies to find HIV cases among older children** and to scale-up access to key tests, including innovative point-of-care early infant diagnosis (POC EID) technologies. Also, children lack access to technologies to detect treatment failure. It can take a long time to get such products approved, prices can be prohibitive, there is limited funding from major donors, and a lack of efficient strategies to place these technologies within existing laboratory networks. These challenges hinder children's access to cutting-edge tools.

New commitments were made to **streamline drug approval processes**, to improve financing of accelerated pathways to develop better paediatric formulations, and to ensure wide availability and uptake of such optimal formulations among affected children.

-The 2018 United Nations General Assembly High-Level Meeting (HLM) on Tuberculosis and the current revision of the Roadmap for childhood tuberculosis together present an important moment to consolidate and **advance advocacy, commitment, resource mobilization and joint efforts by all stakeholders to provide health care and address the burden of TB among children**

The first Roadmap, published five years ago, helped to draw the childhood TB epidemic into the global spotlight after decades of neglect. Today, we are closer to a generation of children free from TB. Armed with new knowledge about how 10% of all TB affects and manifests in children under 15 years of age, we have a clearer vision of what is needed, how to deliver it – and the priority actions and enhanced investments that are urgently required.

The 2018 Roadmap incorporates an additional critical population: adolescents. Despite making up 1 in 6 of the world's people, adolescents have been largely overlooked as global momentum to address TB has grown. Spanning the ages of 10–19 years, adolescents are both at risk of TB and represent an important population for TB control. They often present with infectious TB and frequently have multiple contacts in congregate settings, such as schools and other educational institutions. Nevertheless, **few countries capture TB data in suitably age-disaggregated ways to allow full understanding of its impact in this group and even fewer provide the adolescent-friendly services our young people need to access diagnosis and care.**

Questions to Consider:

Are there preventative measures that can be taken to reduce HIV and Tuberculosis?

Do countries that diagnose HIV at earlier stages have less deaths from the disease?

What factors are stopping certain countries from diagnosing and treating HIV at earlier stages?

Could medical innovation worldwide help to mitigate HIV and Tuberculosis deaths long-term?

How can we spread medical innovation to regions such as Sub-Saharan Africa where these diseases are impacting people the most?

Food and Water Shortages

Topic Overview:

Today delegates will discuss the challenges that the African Union faces in ensuring the availability of food and clean water for its citizens, and possible solutions to those challenges.

According to the World Health Organization, each year **1.8 million people die from diseases related to unsafe water supplies**; 90% of these people are children under the age of 5. Similarly, the WHO estimates that about **400,000 people in Africa die each year as a result of nutritional deficiencies** caused by an inadequate food supply.

Impact on the African Union:

The issues of nutritious food and clean water shortages are closely related. Clean water is a necessary prerequisite to agriculture, food preparation, and food preservation. 84% of people who don't have access to clean water, also live in rural areas, where they live principally through subsistence agriculture. Other issues that come into play are the urban-rural divide (people in cities are twice as likely to have access to clean water as people in rural areas), and sanitation. Only one out of every three people in Sub-Saharan Africa has access to a toilet, and other methods of waste disposal are often inefficient and can end up contaminating community water supplies.

Action Already Taken:

- In 2000, the UN developed eight Millennium Development Goals (MDGs) which remained, until 2015, the overarching development framework for the world. At the end of the MDG period in 2015, there was a final assessment of progress made during the MDG period:
 - The proportion of undernourished people in the developing regions has fallen by almost half.

- One in seven children worldwide are underweight, down from one in four in 1990.
- In 2012, The United Nations Secretary-General launched the Zero Hunger Challenge to inspire a global movement towards a world free from hunger within a generation.
- Organizations formed by the UN to fight hunger internationally:
 - World Food Programme:
 - Responds to emergencies
 - Works to prevent hunger in the long term by using food as a means to build assets, spreading knowledge, and nurturing stronger and more dynamic communities.
 - World Bank
 - Invests in agriculture and rural development to boost food production by encouraging climate-smart farming techniques, restoring degraded farmland, breeding more resilient and nutritious crops, and improving storage and supply chains in order to reduce food losses.
 - The Food and Agriculture Organization of the United Nations
 - Drives the fight against poverty internationally
 - Issues the food price index, which is a measure of the monthly change in international prices of a basket of food commodities
 - International Fund for Agricultural Development
 - Focuses on rural poverty reduction

Questions to consider:

What has been done to reduce hunger in the past, and why was (or wasn't) it effective?

What are the physical, political, and economic barriers to reducing hunger?

Where is hunger the worst, and what do these regions have in common?

What can each country do to help others or themselves?

What can individual communities do to help others or themselves?

What is (or ought to be) the role of wealthier, more developed nations in the fight against hunger?

Sources:

World Health Organization, 12-7-2018, "WHO," <https://www.who.int/hiv/en/>

Inter-Agency and Expert Group, 2015

[http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20\(July%201\).pdf](http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20(July%201).pdf)

United Nations Secretary-General, 6-21-2012, "Remarks at the launch of the Zero Hunger Challenge,"

<https://www.un.org/sg/en/content/sg/speeches/2012-06-21/remarks-launch-zero-hunger-challenge>

Water Project, "The Water Crisis: Hunger Relief and Water in Africa,"

<https://thewaterproject.org/why-water/hunger>