

XXXVI

TECMUN

United Nations
Programme on
HIV/AIDS

XXXVI TECMUN
Session Schedule

Wednesday, April 19th

Registry	8:00 – 9:00 h.
Opening Ceremony	9:00 – 10:00 h.
Recess	10:00 – 10:30 h.
First Session	10:30 – 12:30 h.
Recess	12:30 – 13:00 h.
Second Session	13:00 – 15:00 h.
Meal	15:00 – 16:00 h.
Third Session	16:00 – 18:00 h.

Thursday, April 20th

Master Conference	8:30 – 9:30 h
Recess	9:30 – 10:00 h..
Fourth Session	10:00 – 12:30 h.
Recess	12:30 – 13:00 h.
Fifth Session	13:00 – 15:00 h.
Meal	15:00 – 16:00 h.
Sixth Session	16:00 – 18:00 h.

Friday, April 21th

Seventh Session	8:00 – 9:30 h.
Recess	9:30 – 10:00 h.
Eighth Session	10:00 – 12:00 h.
Recess	12:00 – 12:30 h.
Ninth Session	12:30 – 14:40 h.
Meal	14:40 – 16:00 h.
Closing Ceremony	16:00 – 18:30 h.

XXXVI TECMUN
General Agenda

Secretary General: Ixtli Zenit Ramírez García

COORDINACIÓN GENERAL

Chief of General Coordination: Anael Oliveros Aguilar
Coordinating Supervisor for Media Content: Cristian Rodríguez Lane

ASAMBLEA GENERAL

Subsecretary General: Jade Artemis González Díaz
Coordinating Supervisor: Lia Naomi Mejía Vargas

Reunión de Alto Nivel para la Asamblea General

President: Paulina Moreno Rosales

- A) Medidas para hacer frente al desplazamiento masivo en África subsahariana y en los campos de refugiados de las subregiones.
- B) Estrategias para regular el embargo de armas dentro de Sudán del Sur para garantizar la rendición de cuentas por la violencia sexual relacionada con la guerra civil (CRSV).

Primera Comisión de Desarme y Seguridad Internacional

President: Karla Isabella Juárez Zárate

- A) Estrategias para frenar los tiroteos perpetrados en centros escolares, manteniendo un enfoque en los Estados Unidos de América y en la República Federal de Alemania.
- B) Medidas para evitar la detonación de un conflicto nuclear a causa de la utilización de armas atómicas en la disputa entre Ucrania y la Federación de Rusia.

Tercera Comisión en Asuntos Sociales, Culturales y Humanitarios

President: Catherine Romina Espinoza Mora

- A) Estrategias para disminuir el riesgo de escasez de recursos de las personas con discapacidad, debido a la falta de oportunidades laborales, dificultad para realizar actividades, movilidad limitada y discriminación en Europa, con énfasis en el Reino de España.
- B) Acciones para combatir la discriminación hacia los inmigrantes afrodescendientes en las estructuras institucionales con respecto a la educación y la salud en Europa Occidental como efecto de la negación generalizada y la injusticia social.

Instituto Interregional de las Naciones Unidas para Investigaciones sobre la Delincuencia y la Justicia

President: Daniel Hilario Salazar Meléndez

- A) Estrategias para la prevención del reclutamiento de niños, niñas y adolescentes por parte de grupos de la delincuencia organizada, igualmente para la reinserción social de las víctimas en el triángulo norte de América Central y los Estados Unidos Mexicanos.
- B) Estrategias para la debida aplicación de los marcos jurídicos internacionales en materia de trata de personas con fines de explotación sexual en las rutas hacia Europa Occidental y central, con énfasis en las víctimas provenientes de la región de los Balcanes y la ex Unión Soviética.

World Food Programme
President: Melissa Murillo Yáñez

- A) Measures to reduce and prevent malnourishment due to food scarcity in the Democratic Republic of the Congo, with emphasis in childhood and pregnancy.
- B) Strategies to counteract the impact of climate change in food production within Southern Africa.

United Nations Development Programme
President: Daniela Alejandra Moreno Villagrán

- A) Actions to increase the education level in West and Central Africa with emphasis in the improvement of the post pandemic conditions.
- B) Strategies to counter the disruption of sexual and reproductive health in the Republic of Mozambique with emphasis on the consequences of the Cyclone Idai.

CONSEJO ECONÓMICO Y SOCIAL
Subsecretary General: Elena Ramírez Sandoval
Coordinating Supervisor: Mariana Goytia López Gutiérrez

United Nations Programme on HIV/AIDS
President: Dereck Zayd Ibarra Martínez

- A) Approaches to prevent and counter the stigmatization and discrimination of the HIV and AIDS-infected sectors of the sex industry in the Sub-Saharan African region, with a special preeminence on the dearth of essential services along with the violence and aggression toward those who trade sex.
- B) Strategies to confront and hinder the spread of sexually transmitted infections and HIV regarding the people afflicted by sexual assaults in Central and Eastern Europe, with a special preeminence on the various social constraints of marginalized groups along with the lack of awareness and education mechanisms.

Comisión de la Condición Jurídica y Social de la Mujer
President: Arantza González de la Peña

- A) Medidas para contrarrestar la violencia contra las mujeres a mano de los policas de la moral en la República Islámica de Irán, así como la represión de las manifestantes por parte del Estado.
- B) Medidas para erradicar el infanticidio y el aborto selectivo femenino en Asia haciendo énfasis en la república Popular China y la República de la India.

Programa de las Naciones Unidas para el Medio Ambiente
President: Aretxa Abaunza Díaz de León

- A) Mecanismos para reducir la contaminación del agua por nicotina y microplásticos generados por el desecho de filtros de cigarrillos y cigarrillos electrónicos desechables en el sudeste de Europa.
- B) Medidas para prevenir la pérdida de ecosistemas en América del sur a causa de la sobreexplotación de recursos naturales.

L'organisation des Nations Unies pour l'éducation, la Science et la Culture

President: Angel Uriel Vega Salinas

A) Mesures pour protéger et restituer l'éducation des femmes musulmanes avec insistance sur l'Asie occidentale et l'Asie du sud.

B) Stratégies pour faire face aux effets de la fonte du *permafrost* et des pôles sur la région du cercle polaire arctique, en soulignant la perte du territoire et culture des peuples autochtones.

Fondo Monetario Internacional

President: Abraham Alejandro Carlos Mendoza

A) Estrategias para asegurar el desarrollo económico sostenible en el sur de América, con especial atención en la destrucción de la selva amazónica para el despeje de nuevas tierras para la ganadería y el cultivo.

B) Medidas para mitigar el riesgo en la recuperación económica posterior a la pandemia en la Unión Europea, con énfasis en la crisis laboral debido a la alta oferta de empleos y en las necesidades de empleo insatisfechas de personas desempleadas o subempleadas.

Committee on the Peaceful Uses of Outer Space

President: Yamir Bandala González

A) Measures to reduce the adverse effects caused by the collision of space debris in the atmosphere as a consequence of the space industry.

B) Strategies to cope with the adverse effects generated by the unauthorized use of weapons in outer space.

AGENCIAS ESPECIALIZADAS Y ORGANISMOS REGIONALES

Subsecretary General: Diego Márquez Sánchez

Coordinating Supervisor: Iris Giselle Balderas Arreola

African Union

President: Carmen Dannea García Aguilar

A) Mechanisms to safeguard the integration of the population in the Republic of the South Sudan for the *coup d'etat* in 2013 with an emphasis on the economic crisis.

B) Strategies to reduce violations of human rights of Congolese population caused by the exportation of coltan to developed countries.

Caribbean Court of Justice

President: Bruno Ramírez Barcelata

A) Barbados Royal Police Force Incident involving Tamika and Lynnel Gilbert on October 11th 2016 (Gilbert Family v. The State of Barbados).

B) The State of Trinidad and Tobago 's non-appliance of the Common External Tariff in the acquisition of brown sugar from non-member countries of the Caribbean Community (The State of Belize v. The State of Trinidad and Tobago).

Comité Internacional de la Cruz Roja

President: Monserrat Ríos Fernández

- A) Medidas para mejorar la calidad de vida de desplazados y personas detenidas provenientes del Emirato Islámico de Afganistán después de la retirada de tropas militares de los Estados Unidos de América en el territorio.
- B) Estrategias para la asistencia de víctimas del reciente conflicto Ucrania-Rusia, con enfoque a la violación del Derecho Internacional Humanitario.

Counter-Terrorism Committee

President: Samuel Ortíz Delgado

- A) Actions to reduce the financial support to the terrorist organization Da'esh in the Gulf of Guinea, with emphasis on human trafficking as an illicit source of revenue.
- B) Strategies to reduce explosive, suicide, and firearms attacks under the Taliban regime in the Kabul region of Afghanistan, with emphasis on attacks against minorities and civilians.

Historical Security Council

President: María Fernanda González Rosales

- A) Measures to counteract threats and negotiate arrangements between the Republic of Cuba, the United States of America and the United Socialist Soviet Union, in relation to the discovered Soviet nuclear missiles in the Republic of Cuba (1962).
- B) Actions to avoid further hostilities and usage of military response caused by the first North Korean armed intervention in the Republic of Korea, remarking the nonexistent official peaceful agreement of the division of the Korean Peninsula (1950).

Organización de los Estados Americanos

President: José Manuel Cervantes Sánchez

- A) Estrategias para limitar las consecuencias de la lucha contra grupos criminales en la República de El Salvador dando énfasis al reclutamiento forzado y la protección de los derechos humanos.
- B) Medidas para contrarrestar la creciente gentrificación en Hawái con énfasis en la crisis social de hawaianos nativos sin hogar y su relación con la industria turística.

“Cuando sientas que pierdes el rumbo, recuerda para qué estás aquí y por qué lo estás haciendo.”

-Anonymous

For your moment,

Eleven years ago I stepped into a TECMUN debate room for the first time. That day I accompanied my brother, who was representing the Republic of El Salvador, as he debated about the homicides of rural groups in Latin America caused by drug trafficking. On the other hand, I was just admiring everything he and the delegations that made up the debate were arguing, as well as the tenacity with which they were looking for some way to help those who needed it most. They inspired me in a way that I will never forget in my life. It was then that I realized that I wanted to do it too, I wanted to become what they were at that time, agents of change. Later I had the opportunity to participate as a delegate, in my first model uncertainty and fear prevailed. I felt insecure about myself, I thought my opinion was not important and for that reason I did not express it. At that time I was regressing because I didn't feel like the agent of change that my brother once encouraged me to be. It wasn't until my second year participating in TECMUN that I discovered my potential, I questioned why I should be afraid to speak up for things that deserve to be heard. I was representing the Islamic Republic of Iraq in the Historic League of Arab States, this year I was thinking a lot about the fact that something could go wrong in the debate, that's why I started to remember the reason why I decided to participate in this model; I wanted to get out of my comfort zone. Once I was at the closing ceremony, I promised myself that I would always do my best to leave my mark wherever I went, as well as continue to learn and inspire others. For me, this model represented evolution.

I share with you a part of my story in TECMUN because just like me, you are probably looking to evolve after a period of regression, or i don't know, maybe you are aiming to fulfill other objectives. Regardless of the path you want to take in your life, you should never be silent about what seems unfair, participate and give your opinion because the power of change is in the actions you decide to do or not, learn because cultivating your mind is essential to understand yourself and others, help those who need it most because you have privileges that many people in the world can not enjoy, finally inspire yourself and inspire others, you never know if you will become an example for them to follow. Do things with passion, love and purpose every day, do it for you.

Whatever the reason you decided to participate in TECMUN is, take advantage of the fact that you are here today. Today you have the opportunity to expand your limits, you have the opportunity to learn, to teach and to motivate whoever needs it. Always remembering that you will have a support network that trusts you so you can achieve your goals. Be that person you always wanted to find to guide you in your learning process and trust you, because you are capable of doing it.

I'm living my last TECMUN after five wonderful years, therefore I want to thank you for inspiring me, for giving me reasons to go further and further. I thank you for being part of one of my greatest passions. I hope that after these three days nothing will be the same for you, I hope that you have made friends, that your committee has reached a resolution project, that you have found your passion, that you have enjoyed yourself and that you have learned something new. But above all, I hope you have **evolved**.

Ixtli Zenit Ramírez García
Secretary General for the
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“Education is the most powerful weapon you can use to change the world” -Nelson Mandela

Dear participant,

Whenever I have to write a letter or a speech for you I start the same way, expressing how much I admire your presence in this model. It is not easy to talk in public, do an extensive research, defend what you believe, propose innovative and creative solutions and, above all, open your eyes to today's world. I admire that you are willing to give your best, that you have decided to invest time and energy in seeking to solve the great unknown of today, during these three days of model, "how can I make my world a better place?"

I confess that for me, this is not just a simulation of a United Nations model. I am here, because I love to see more than nine hundred students with a smile on their faces as they enter their debate rooms, happy at the end of the day because they were able to make at least one resolution to their topic hoping one day to make it happen. That passion and dedication is the one that motivates me and that gives me faith that our world will not fall.

This work is one of the best things that has happened to me in life, it makes me feel part of the change and part of those smiles that I love so much to appreciate. I know that the Conference Officer for the United Nations International Children's Emergency Fund, who began with all the enthusiasm this great journey in 2020, is now proud to be something she never imagined it could be: member of the High Secretariat as Chief of General Coordination.

So from my own experience I can assure you that you can achieve the unimaginable. There will be many obstacles, stumbling blocks and difficult decisions to make but I can also promise you that with a lot of passion, dedication, patience and the support of the people you love most everything else will gradually go away.

Without further add, I thank you for making the decision to participate in this model and I wish you to leave those rooms with a big smile as once I did.

Anael Oliveros Aguilar
Chief of General Coordination for the
XXXVI TECMUN

Dear delegation,

I want you to know that even though I will not have much contact with you during the model, you helped me fulfill a dream. I want to thank you for being part of what is going to be my last United Nations model. In these days you are going to be part of a resolution project that is trying to solve a worldwide problem that affects millions of people. Even if this is just a model, I thank you for your ability to dream and have the energy to solve this kind of problem.

TECMUN for me was more than a dream. Throughout my high school it was my family, my support and my happy place. I met the most important people for me, from the first committee I was in, my presidencies and the High Secretariat. This project made me grow as a person and gave me the opportunity to live unique experiences. Presidents, thank you for staying by my side through thick and thin, for trusting me to lead your committee by the hand throughout the semester. Today I say goodbye to you and to you TECMUN. I hope I have left my mark on you and if I did not, I apologize. I promised to always give you my best, and I swear I did.

Delegation I hope that TECMUN has changed your perspective of the world a little bit and that it has influenced you as it did me. And lastly I want to express my admiration for your work as a delegation, I know it is not easy and I know it took you time to get here. If no one has told you, I am very proud of you. I love you Tecmun and you will always be my happy place.

Elena Ramírez Sandoval
Subsecretary for the Economic and Social Council
for the
XXXVI TECMUN

“Through the dark, through the door; through where no one’s been before”

- Benj Pasek

Gender identity, pornography, prostitution... sex. Every one of these words is stigmatized and categorized as something bad, something only people who do not follow the norm do, and I think that’s exactly what we need to change. But when I'm lying in my bed, I can't imagine a world we didn't design, a world that didn't fit us. Just thinking about all this future's colours, ideas, and brightness amazes me. Today’s outworld is really complicated, but we are not here just to contemplate and do nothing; we are here to make it our home, our safe place, and ours. Even if the sky is gray, we can redefine it until we reach those stars we are meant to be.

I began caring about STDs about six months ago, when I was abused. At first, everything was dark, but not as dark as when it hit me: I feared being STD-infected. I suffered through the entire process, and even though I did not contract HIV, I would not want anyone else to go through it, at least not alone. I’m glad to be here because I won't let anyone go through this the same way I did. Back then, I was afraid of being judged, undervalued, and treated differently, but now I know none of those things will happen unless I let them. I want the people to know I’m a survivor, proud of who I am, and happy to be here. The person I went after that, it’s not me; I’m not the one who blamed itself, and I’m not that little kid who thought that being sexualized was the only thing I was valuable for, and now I’m here telling you that there is always a chance to continue; it is not the end, and it would never be.

I'm proud to say that nothing is as dark as you think, and the path to finding the light is closer than you think. It's your choice; you can keep quiet and no one will judge you, or you can raise your voice, and I promise you won't be judged either, but even if you are, you won't care anymore. Being proud of who you are is difficult, but nothing would be as satisfying as achieving it. Live your life, enjoy it, love it, cry over it, fall in love, and break your heart; do whatever you want, but never forget that everything is for love, and love is for everyone.

Dereck Zayd Ibarra Martínez

President of the United Nations Programme on HIV/AIDS
for the XXXVI TECMUN

Background

As a part of the Sustainable Development Goals, the United Nations Programme on HIV/AIDS (UNAIDS) is leading the worldwide fight to eradicate acquired immunodeficiency syndrome (AIDS) as a public health hazard by 2030. In the more than 35 years after the first cases of the human immunodeficiency virus (HIV) were discovered, 78 million people have acquired the virus, and 35 million have passed away from sexually transmitted diseases (STDs). Since it began operations in 1996, UNAIDS has inspired innovation and collaboration on a global, regional, national, and local scale in an effort to finally call for an end to the spread of STDs. As a joint of 11 United Nations Committees and 22 regional and international ambassadors, the UNAIDS looks forward to helping counter the discrimination and the risk of people who have acquired these illnesses, in the 188 countries in which UNAIDS has headquarters.

Faculties

The United Nations Programme on HIV/AIDS is entitled to:

- Finance and implement campaigns, subprograms, and field-based assistance, along with a wide range of opportunities for STD-affected people to combat stigma, discrimination, gender, and socioeconomic inequality, by raising awareness, respect and education.
- Enacts coordination, technical support, strategic direction, health hazards prevention campaigns, well-being and human rights protection projects, and advocacy for the enforcement of legislative measures and international legal instruments.
- Strengthens health systems, offers effective medical products, fulfills security and legislative measures, and provides track, collect, disseminate, and address information.
- Catalyzes and connects leadership from governments, the private sector, communities and other United Nations committees to deliver life-saving HIV services to counterattack the legal and policy barriers by encouraging transnational approaches.

Topic A

Approaches to prevent and counter the stigmatization and discrimination of the HIV and AIDS-infected sectors of the sex industry in the Sub-Saharan African region, with a special preeminence on the dearth of essential services along with the violence and aggression toward those who trade sex.

*By: Dereck Zayd Ibarra Martínez
Mariana Carolina Guerrero Zárate
Frida Michelle Valadez García*

Background

In 2019, sex workers of all genders accounted for around 8% of new adult human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) infections in the Sub-Saharan African region (SSA). People who exchange sex are more likely to participate in risky sexual practices, for instance, sex without a condom, sex with numerous partners and substance use, which increases the risk of contracting or transmitting HIV, AIDS and sexually transmitted diseases (STDs). Those who exchange or trade sex¹ on a regular basis as a source of continued revenue are more likely to contract HIV than those who do so infrequently. Escorts; exotic dancers; state-regulated sex workers²; and men, women, and transgender people who participate in survival sex³ and trading sex to meet basic daily necessities represent the most common HIV-infected people. The Joint United Nations Programme on HIV/AIDS reported a 36% HIV prevalence among sex workers in 2019. As in the sex industry, the members do not regularly use the necessary preventive instruments as a consequence, the infection rate increases.

The majority of sex workers have been victims of violence, and most have been victims of more than one sexual assault. In fact, according to research studies by the African Sex Worker Alliance, violence pervades the lives of sex workers. Nonetheless, sex work is not inherently violent and aggression against sex workers is also not unavoidable. Violence against sex workers is motivated and worsened by stigmatizing views and attitudes about sex workers, as well as by societal marginalization and criminalization of their industry. The cause for HIV/AIDS discrimination is due to the nature of the disease, which is due to its incurability and fatality, contagiousness and transmissibility, and the disgusting, unsightly, and disturbing appearance of the infected individual in the advanced stages of the disease. Criminalization has been shown to hinder⁴ access to healthcare services such as HIV prevention, treatment, care, and support, due to the stigmas associated with being against family boundaries, sex workers in the SSA region face physical and sexual violence, the

¹ **Sex trade:** activities that involve providing sexual services for money (Cambridge Dictionary, 2022).

² **State-regulated sex workers:** the whole or part of a state agency statement of general or particular applicability and future effect designed to implement, interpret, or prescribe law or policy or describing a person who has sex with someone for money (Cambridge Dictionary, 2022).

³ **Survival sex:** exchanging sex to meet immediate needs, this could be financial needs, accommodation or somewhere to sleep (UNAIDS, 2021).

⁴ **Hinder:** to limit the ability of someone to do something, or to limit the development of something (Cambridge Dictionary, 2022).

inability to contract safe sex, a high illness burden, and a lack of access to essential health services.

Sexually transmitted diseases health hazards

Sexually transmitted infections (STIs) pose a significant public health hazard worldwide, with an estimated 357 million new cases of four curable STIs (chlamydia, gonorrhea, trichomoniasis, and syphilis) among 15 to 49 year olds, 417 million cases of herpes simplex type 2 (HSV2), and 291 million cases of human papillomavirus (HPV) among women each year. The incidence of STI in Sub-Saharan Africa was estimated to be 63 million per year, making it one of the most impacted places in the world and accounting for an estimated 40% of the global STI burden⁵. The epidemic⁶ of STIs has major implications for morbidity, mortality and the general quality of life and well-being of individuals. STIs are one of the leading causes of infertility in the world, are responsible for fetal and neonatal casualties, 300,000 fetal and neonatal casualties each year, and can lead to pelvic inflammatory disease and cervical cancer, with HPV infection held responsible for 530 000 cases of cervical cancer as well as 264 000 cervical cancer casualties each year.

Furthermore, STIs have been linked to cellular alterations that precede cancer and are known to facilitate HIV transmission. As a result of the social, economic, and structural problems they encounter⁷, important populations, particularly female sex workers (FSW), are among the most vulnerable. Indeed, the HIV prevalence among FSWs in SSA is projected to be 36.9%, compared to 13.5% among women of reproductive age. The burden of STIs in this demographic is also high in SSA: 50 to 66% of FSW normally have a treatable STI, 10% have an active genital ulcer, 30% get syphilis, more than 30% get gonorrhea and chlamydia, and 60% have HSV2. Based on biological testing, the most recent estimates in SSA show an overall prevalence⁸ of STI among FSWs ranging from 4.2% for gonorrhea to 32.9% for HPV in 2017.

⁵ **Burden:** a difficult situation or unpleasant responsibility that you must deal with or worry about (Cambridge Dictionary, 2022).

⁶ **Epidemic:** the appearance of a particular disease in a large number of people at the same time (Cambridge Dictionary, 2022).

⁷ **Encounter:** to experience something, especially something unpleasant (Cambridge Dictionary, 2022).

⁸ **Overall prevalence:** the fact that something is very common or happens often in a complete escenario (Cambridge Dictionary, 2022).

HIV and AIDS in the Sub-Saharan African region

Globalization is a strong motivator of development and economic creation. But even as the world becomes more networked, hundreds of millions of women, men and infants are still trapped in extreme hunger, lack of economic resources, illiteracy⁹ and disease. HIV/AIDS is one of the most severe infectious diseases of the modern age, killing about 2 million people each year. Sub-Saharan Africa is still bearing the heaviest burden. According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), SSA is home to more than two-thirds of all HIV-positive people globally. Africa represents the repercussions of poor healthcare investments, which have allowed HIV to spread into a global pandemic.

Despite the fact that SSA has only 11% of the world's population, it is the hub of HIV/AIDS. The global prevalence of adult HIV is 1.2 percent, but it is 9.0 percent in the Sub-Saharan African region. According to UNAIDS, there were 40 million people living with HIV/AIDS at the end of 2001, with 28.5 million from sub-Saharan Africa. In 2001, five million adults and children were newly infected with HIV, with 3.5 million from sub-Saharan Africa. In 2001, three million individuals died from AIDS-related causes, with 2.2 million fatalities occurring in Sub-Saharan Africa.

In Sub-Saharan Africa, AIDS is becoming the biggest cause of mortality. AIDS is the world's fourth-biggest cause of casualties. In many African countries, life expectancy at birth has fallen due to sexually transmitted diseases. Because of high birth rates and an increased AIDS mortality rate among adults, this region is host to more than 90% of the children orphaned as a result of the HIV/AIDS epidemic. However, these figures conceal¹⁰ an essential aspect of the tale. The majority of the most severely affected countries constitute an "AIDS belt" throughout eastern and southern Africa. This belt, which spans from Djibouti and Ethiopia across the east of the continent to South Africa, is made up of around 16 countries. These countries account for less than 4% of the world's population but contribute to more than 50% of HIV cases worldwide.

⁹ **Illiteracy:** a lack of the ability to read and write (Cambridge Dictionary, 2022).

¹⁰ **Conceal:** to prevent something from being seen or known about (Cambridge Dictionary, 2022).

STD-infected people in the sex industry

Female sex workers (FSW) face a higher risk of sexually transmitted illnesses (STIs) and HIV than other females worldwide. As a result, FSWs have an urgent need for increased preventative activities. While STI surveillance among FSWs is poor, the reported prevalence of syphilis among FSWs in the Sub-Saharan African region is exceptionally high, at over 13%, compared to the 3.2% reported by 38 cross-regional countries. Furthermore, according to the AIDSinfo, nearly 40% of FSWs in SSA have HIV, and African women account for 92% of all HIV-related casualties attributable to sex work.

The sex trade is considered risky sexual behavior (RSB) among men, as men who consume the sex industry are a bridge demographic for sexually transmitted illnesses (STIs), including HIV/AIDS. Clients of female sex workers act as a "bridge" for HIV/STI transmission through unprotected intercourse¹¹ with other clients, including female sex workers, wives, girlfriends, males, and others. RSB are behaviors that put a person at risk of developing STIs and having an unexpected pregnancy, raising the afflicted population as the babies can also get infected. It has been classified to encompass¹² behaviors such as having sex at an early age, having several sexual partners, having sex under the influence of drugs or alcohol, and having unprotected intercourse.

Furthermore, among men who had sex with commercial sex workers, the prevalence of any STI or HIV was 16.5%, compared to only 2.3% among men who had intercourse with only their regular partners. The association between commercial sex and HIV/AIDS vulnerability in Sub-Saharan Africa. For men, aged 15 to 59 years, transactional sex was responsible for 84.0% of HIV diagnoses. Despite this, there is evidence to support the idea that male consumers of the male sex industry use condoms inconsistently and are more likely to get STIs. Since RSB behaviors like exchanging sex, having several sexual partners, and not using protection have been reported to increase the risk of STIs, preventive services for STIs have become crucial.

Additionally, there are intimate and behavioral factors that increase the likelihood of men who trade sex, such as satisfying sexual drive, a desire for specific sexual practices or acts that regular partners are unable or unwilling to accommodate, sexual satisfaction,

¹¹ **Intercourse:** the act of doing anything related with sex (Cambridge Dictionary, 2022).

¹² **Encompass:** to include several different things (Cambridge Dictionary, 2022).

convenience, entertainment, and the belief that people are not meant to be monogamous. Other variables include the effect of drug and alcohol companionship, traveling troubles, domestic problems, the unavailability of wives, and health reasons such as menstruation, pregnancy, and disease. Most operations in Africa addressing sex workers and clients operate in isolation, with little or no assistance from national governments or international donors, and hence have limited coverage. These interventions include condom education, partner reduction, HIV testing and counseling¹³, alcohol harm reduction, family planning counseling services, contraception¹⁴, post-exposure prophylaxis¹⁵ after sexual violence, and understanding of HIV, STIs, and local services.

Stigmas and discrimination in the sex industry

Addressing the stigmas associated with the sex industry is essential since they affect all elements of the industry, from what laws are written to control it to how those laws are implemented by the police to why some sex workers have lower health than other populations. Stigma influences how sex workers engage with others, on whom they can have a significant impact. For instance, the overall well-being of people such as officers, doctors, pharmacists, social workers, assistance agents, landlords, those purchasing sex, relatives, friends, love partners, and managers. However, most people have only a hazy understanding of what stigma is and how it affects the lives of stigmatized groups and individuals both directly and indirectly.

Sex workers are prime targets for discrimination as they are blamed for things like the dissolution of the conventional family, sexually transmitted illnesses (notably HIV/AIDS), rising urban crime, particularly drug-related crime, and adolescent subversion¹⁶. While the origins of sex work stigmas may be linked to deeply held attitudes about healthy sexuality, the sex industry has grown enmeshed with other stigmas, in part because many workers employed in the commercial sex industry are stigmatized for other reasons. Particularly, the sex business is disproportionately made up of demographics that have historically been used as targets for

¹³ **Counselling:** the job or process of listening to someone and giving that person advice about their problems (Cambridge Dictionary, 2022).

¹⁴ **Contraception:** the use of any of various methods intended to prevent a woman becoming pregnant (Cambridge Dictionary, 2022).

¹⁵ **Post-exposure prophylaxis:** HIV medicines taken very soon after a possible exposure to HIV to prevent the virus from taking hold in your body (UNAIDS, 2020).

¹⁶ **Subversion:** the act of trying to destroy or damage an established system or government (Cambridge Dictionary, 2022).

social issues, such as women, visible minorities, immigrants, emigrants, people with STDs, drug users, people with disabilities, single parents, and members of the LGBTIQ+ community. Those who experience many stigmas as a result of their work, gender, sexual orientation, color, ethnicity, or socioeconomic status have less access to crucial resources and, as a consequence, are less able to protect themselves against the negative impact of interactive stigmas.

The sex industry's aggression and violence

Because of their profession, sex workers experience stigma and discrimination. Clients' stigmatizing attitudes toward sex workers may lead to dehumanization, violence, and an inability to negotiate condom use. Due to low self-confidence, self-efficacy, and stress, internalized stigma, such as the act of accepting stigmatizing ideas as true or painful experiences as right, may make negotiating condom use more intricate¹⁷. Furthermore, earlier HIV prevention campaigns promoting consistent condom use among sex workers have been impeded by sex industry stigma.

Additionally, it is commonly known on a global scale that sex workers frequently experience direct violence while performing their jobs because of their "perceived vulnerability" as a marginalized minority. Consequently, sex workers have few legal protections and may easily be exploited or abused by clients, coworkers, and law enforcement officials. According to a systematic review of research from UNAIDS, sex workers have a 62% chance of experiencing sexual violence at some point in their careers and a 32 to 55% probability of being the victim of sexual assault each year.

Little is known regarding the prevalence of stigma and prejudice among female sex workers in SSA or its impact on their sexual habits. The isolation and disempowerment of sex workers, enforced by the threat of violence, and HIV stigma may create barriers to working out safe sex practices, thereby increasing the risk for human immunodeficiency virus (HIV) and other sexually transmitted infections (STIs). In conclusion, clients' stigmatizing attitudes toward sex workers and discrimination may lead to dehumanization, violence, and the increase of sexually transmitted diseases.

¹⁷ **Intricate:** having a lot of small parts that are arranged in a complicated or delicate way (Cambridge Dictionary, 2022).

Lack of awareness and education

A lack of knowledge about sexually transmitted diseases leads to HIV and AIDS infection, which is concerning for young people who are unaware of how to protect themselves. Based on studies, people usually get STDs around 16 to 24 years old, which is also the age at which teenagers become sexually active. A lack of information is one of the two factors that contribute to the prevalence of HIV and AIDS, which are mostly transmitted among teenagers. This condition has the greatest impact on young people, making it more difficult to overcome¹⁸. Surveys from UNAIDS indicate that over 60 countries show that 50% have the wrong idea of how HIV/AIDS is transmitted. In some countries, only 20% of young people have proper knowledge of how to protect themselves.

According to AIDSinfo, every day, 6,000 young people get infected with HIV, and in countries like Cameroon and the Central African Republic, more than 80 percent of women are aware of what HIV consists of 99% of young women have heard of AIDS, but only 9 are aware of how to avoid getting infected. There are some countries where infections have decreased due to the information, protection, and services they have provided. whereas Sub-Saharan Africa, which accounts for only 11% of the global population, has the highest rate of HIV and AIDS infection. AIDS is the leading cause of death in sub-Saharan Africa. In 2001, five million people got infected with HIV and AIDS, and 3.5 million were from sub-Saharan Africa. In 2001, three million people died from AIDs, and 2.2 million were from Africa. This is due to the lack of information and services that citizens have access to (AIDSinfo, 2021).

A decrease in new HIV cases has been documented in more affluent places around the world; nonetheless, the gap in impoverished¹⁹ areas continues to expand. Sub-Saharan Africa has few healthcare alternatives and a high mortality rate. Socioeconomic variables, as well as a lack of access to competent health care and treatment, have a significant role in the prevalence and incidence of HIV in these areas. In order to reduce the stigma and transmission of HIV, there is a demonstrable need for programs that facilitate individual and community HIV education, prevention, and treatment. The Democratic Republic of the Congo

¹⁸ **Overcome:** to defeat or succeed in controlling or dealing with something (Cambridge Dictionary, 2022).

¹⁹ **Impoverished:** something or someone with lack of economic resources (Cambridge Dictionary, 2022).

(DRC) is one of the hardest-hit countries in Sub-Saharan Africa, with extremely poor socioeconomic status and education rates leading to alarmingly high HIV prevalence.

Dearth²⁰ of essential services and criminalization

Human rights violations against critical populations, such as sex workers, have been shown to impede their access to HIV prevention, treatment, support and care, as well as reproductive and sexual health services. The ability of sex workers and other relevant populations to get services and sensitive material about HIV/AIDS prevention and health care without risk of harassment or discrimination will be critical to ending the AIDS epidemic. According to South African health data, decriminalization is becoming increasingly important. HIV prevalence among female sex workers is estimated to be between 40% and 88%, compared to 14.4% among women in the general population. HIV prevalence among female sex workers in SSA can reach 71.8 percent, one of the highest rates in the world. Decriminalization is supported by important organizations fighting to end new infections in SSA, including the Desmond Tutu Foundation, the Medical Research Council of South Africa, and the Treatment Action Campaign.

Unrecognizing sex workers as real workers also prevents sex workers from accessing essential social and health safety nets offered to other workers, which is especially devastating during recessions and COVID-19 lockdowns. Sex workers claimed increased discrimination and harassment, as well as exclusion from financial assistance measures, during COVID-19. Consequently, criminalizing sex work adds to other rights abuses, such as denying the right to life, housing, security, privacy, and health care. According to the international human rights law that establishes obligations that the states must uphold²¹, every person has the right to freedom and security for humans, the highest attainable standard of health, including prevention and treatment in the framework of epidemics, the right to occupational safety, and the right to self-determination over one's own physique and sexuality without discrimination.

²⁰ **Dearth:** a situation when there is not enough of something, a lack (Cambridge Dictionary, 2022).

²¹ **Uphold:** to defend or keep a principle or law, or to say that a decision that has already been made, especially a legal one, is correct (Cambridge Dictionary, 2022).

UNAIDS' response

The United Nations Programme on HIV/AIDS is dedicated to ensuring everyone has access to HIV/AIDS prevention, treatment, and support services. Aims to prevent the spread of HIV, improve life expectancy and quality of life for those affected, and ensure a global and coordinated approach in the fight against HIV/AIDS. One clear example is the "90-90-90 Treatment for All" project, with its ambitious target of helping end the AIDS epidemic. This project seeks to ensure that 90% of all people living with HIV know their status, 90% of all people diagnosed with HIV infection will receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy will have viral suppression. By the end of 2019, thanks to this project, 81% of people with HIV knew their status and 67% were receiving antiretroviral medication, which equates to an estimated 25.4 million of the 38.0 million people with HIV.

Moreover, UNAIDS also implemented the "Global AIDS Strategy 2021–2026: End Inequalities, End AIDS." Which is a daring²² new strategy to reduce the gaps obstructing progress toward ending inequalities by using an inequality perspective. The Global AIDS Strategy seeks to lower these AIDS-related disparities and gives priority to those who have not yet received life-saving HIV-related services. The strategy outlines²³ strong goals and evidence-based priority activities to put all nations and communities on track to eradicate AIDS as a public health hazard by 2030. Achieving the goal of eradicating HIV and AIDS has not been reached due to the different stigmas, discrimination and criminalization that exist in the Sub-Saharan African region, as well as the lack of medical support for people who are part of the sex industry.

²² **Daring:** showing bravery and willingness to risk danger or criticism (Cambridge Dictionary, 2022).

²³ **Outline:** a description of the main facts about something (Cambridge Dictionary, 2022).

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Topic B

Strategies to confront and hinder the spread of sexually transmitted infections and HIV regarding the people afflicted by sexual assaults in Central and Eastern Europe, with a special preeminence on the various social constraints of marginalized groups along with the lack of awareness and education mechanisms.

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Background

Sexually transmitted infections (STIs) and sexually transmitted diseases (STDs) grow fast throughout the region of Central and Eastern Europe (CEE), raising the population's health hazards and social constraints. According to the United Nations News, more than one million people get infected with sexually transmitted diseases worldwide every day, and more than 650 thousand people pass away in the CEE every year (UNN, 2022). This has been exacerbated by two major causes: the number of people infected by sexual harassment and the lack of sexual education mechanisms. The Centers for Disease Control and Prevention estimate that 43% of those who experience sexual assault develop STD infections. Because of the trauma, discrimination and social constraints, few abused people resort to the necessary measures to protect themselves and others who might be afflicted. Therefore, the Central and Eastern Europe region has a low awareness rate of STDs at only 67%, which increases the risk of the virus spreading as people who have been sexually harassed do not have access to the appropriate prevention measures or do not have the requisite education mechanisms to seek them.

The spread of STDs and the lack of education systems impact the population in two ways: those who are not infected but are unaware of the risks of acquiring viruses, and those who are infected but do not take the necessary preventive measures. In the CEE region, the STD pandemic caused the casualties of 35,000 people in 2020; by 2022, more than 1,6 million people had the virus. Since most STDs don't have noticeable symptoms, individuals do not take the required precautions to manage their health, putting more people under a burden situation. Most of those who suffer from sexual abuse belong to specific sectors, such as inmates, members of the LGBTIQ+ community, people infected through injected drugs, or members of the sex industry²⁴, which increases social barriers and discrimination. Awareness²⁵ mechanisms and sexual education are crucial for the afflicted population in the CEE region to preserve the well-being of the different marginalized groups that can't access the necessary preventive medical products and suffer from various social constraints. As most of the

²⁴ **Sex industry:** business activities that provide sexual services, such as prostitution (selling sex) and sexual entertainment (Cambridge Dictionary, 2022).

²⁵ **Awareness:** knowing that something exists, or having knowledge or experience of a particular thing (Cambridge Dictionary, 2022).

victims come from different marginalized sectors that suffer from stigma²⁶ and discrimination, the conscientization rate decreases and the spread of HIV²⁷ and AIDS²⁸ increases.

Spread of sexual infections and HIV in Central and Eastern Europe

According to AIDSinfo, in the Central and Eastern Europe region around 160 thousand people living with HIV, in people over 14, statistically the age at which they begin to have sex. Four bacterial sexually transmitted infections are being monitored in Central and Eastern Europe: Chlamydia, Gonorrhea, Syphilis, and Lymphogranuloma Venereum (LGV). Every year, countries in the CEE region upload data to the European Surveillance System, which is conducted by the European Centre for Disease Prevention and Control (ECDC), in line with the European Union case definitions for confirmed cases, which are available in the ECDC Surveillance Atlas of Infectious Diseases. Compared to 2015, the number of confirmed STIs rose by 9% for chlamydia, 55% for gonorrhea, 25% for syphilis and 75% for LGV in 2019. STIs that produce inflammation and ulceration increase the infectiousness of people who are HIV-positive and their partners' susceptibility to infection by directly promoting HIV replication; however, data show that antiretroviral²⁹ treatment effectively hinders HIV transmission even in the presence of STIs. HIV continues to modulate the influence of STIs, most notably the human papillomavirus, which remains a major source of disease in HIV patients.

The male-to-female distribution in total CEE chlamydia infections was 60% of known cases in those aged 15–24 years, a demographic with a high chlamydia incidence that is targeted through testing strategies. There were 82% of instances with reported routes of transmission among heterosexual women and men and 13% in men who had sex with men (MSM). For cases with stated modes of gonorrhea transmission, 48% were men who have sex with men, 24% were heterosexual women, and 22% were heterosexual males; the prevalence estimates of known HIV infection in these instances were 19%, 0.6%, and 1.3%, respectively.

²⁶ **Stigma:** a strong feeling of disapproval that most people in a society have about something, especially when this is unfair (Cambridge Dictionary, 2022).

²⁷ **HIV:** human immunodeficiency virus: the virus that causes AIDS (Cambridge Dictionary, 2022).

²⁸ **AIDS:** Acquired Immune Deficiency Syndrome: a serious disease caused by a virus that destroys the body's natural protection from infection (Cambridge Dictionary, 2022).

²⁹ **Antiretroviral:** HIV treatment (antiretroviral therapy or ART) involves taking medicine as prescribed by a health care provider (CDC, 2022).

While the incidence of syphilis cases in MSM living with HIV remained steady from 2015 to 2019, there was a 44% rise in syphilis infections among HIV-negative men who have sex with men. From 2004 and 2019, 99% of LGV cases with known modes of transmission occurred in men who have sex with men, while 73% of the known HIV status occurred in men who have sex with men living with HIV. The male-to-female distribution in overall the Central and Eastern Europe cases was 4% among heterosexual infections and 31% for men who have sex with men infections in HIV patients.

Sexually assaulted STI-infected people

Sexual violence is any sexual act committed against the will of another person, either when the person does not give consent or when consent cannot be given because the person is a child, has a mental disability, or is severely intoxicated or unconscious as a result of alcohol or drugs (UN WOMEN, 2022). A report given by the United Nations in 2022, states that approximately 15 million adolescents, aged 15 to 19, have experienced forced sex at some point in their lives, and 45% to 55% of women in the European Union have experienced sexual harassment³⁰ since the age of 15 (UN WOMEN, 2022). A report given by the United Nations in 2022 states that approximately 15 million adolescents, aged 15 to 19, worldwide have experienced forced sex at some point in their lives, and 45% to 55% of women in the European Union have experienced sexual harassment since the age of 15. According to the Centers for Disease Control and Prevention, 43 percent of people who have been sexually assaulted get STDs. Due to the trauma, few of the abused people take the required precautions to protect themselves and others who may be harmed. As a result, the CEE has a low STD awareness rate of 67%, increasing the risk of the virus spreading because people who have been sexually abused do not have access to effective preventative measures or the education systems needed to obtain them.

Sexual abuse is a major global public health hazard that is linked to unfavorable emotional and behavioral problems and high-risk sexual behaviors in adulthood. According to the European Centre for Disease Prevention and Control, men who have sex with men have a higher prevalence of sexual assault and STD history than the overall population, and sexual abuse may play a role in MSM's increased vulnerability to HIV in Central and Eastern

³⁰ **Sexual harassment:** unwanted or offensive sexual attention, suggestions, or talk, especially from an employer or other person in a position of power (Cambridge Dictionary, 2022).

Europe. The health hazards of sexual violence against boys and men are one of the focal points of UNAIDS to achieve a significant decrease in HIV in the CEE region. Despite being less frequent than it is for women, the National Intimate Partner and Sexual Violence Survey in the United States found that up to 1.7% of men have been victims of sexual assault. Sexual assault victims are particularly vulnerable to developing an STI, which needs to be avoided, identified, treated, and monitored after recovery. Although the total global prevalence of STIs in the context of sexual assault is unknown, according to a study by PubMed Central, 29% of women who reported being sexually assaulted contracted some type of sexual infection.

Marginalized involved groups

The Centers for Disease Control and Prevention estimate that 43% of those who experience sexual assault develop STD infections; these people come from a variety of sectors, including inmates, LGBTIQ+ members, sex workers, migrants and minorities. People who identify as members of non-dominant groups are marginalized on a personal and social level. As a result of sexual assault, people in the CEE, such as women, people from different Etnies, teenagers, elderly adults, the homeless and substance-addicted individuals, have faced implicit or explicit denial of privileges, rights, and opportunities. Historical oppression, present systemic biases³¹, and individual prejudices all contribute to the marginalization of these groups.

In prisons, access to suggested prevention, testing, and treatment for STD illnesses is frequently unavailable. When it exists, the services provided are inequitable in comparison to those offered in the community. Female inmates account for 5–10% of the global inmate population and they are more likely to take drugs; therefore, their populations frequently have greater HIV prevalence rates than male convicts. Over the last six years, the global number of women incarcerated has increased by 16% on average. Gender-based sexual violence affects women in jail. They are more prone to self-harm and may participate in risky behaviors and practices such as improper tattooing and injectable drug use.

Therefore, men who have sex with men (MSM) remain disproportionately afflicted by sexually transmitted illnesses such as HIV in Central and Eastern Europe. The epidemics revealed high-risk behavior and widespread sexual networking throughout Europe. In the CEE region, sexual relationships between men constituted the most common form of HIV

³¹ **Biases:** the action of supporting or opposing a particular person or thing in an unfair way, because of allowing personal opinions to influence your judgement (Cambridge Dictionary, 2022).

infection transmission, followed by heterosexual intercourse. Currently, MSM accounts for about 50% of all syphilis cases recorded in Europe, with a considerable range across Member States, with some countries reporting nearly 80% of all men who have sex with men cases. Similarly, 35% and 24% of HIV and gonorrhea diagnoses are reported in MSM, respectively. The continued outbreaks and escalating trends indicate the need for enhanced STD prevention efforts to halt the spread of STDs.

Moreover, people who exchange sex for economic resources or nonfinancial objects include a wide range of people who trade sex for money or other items such as food, drugs, medical products, and shelter³². Since they are more likely to participate in hazardous sexual behaviors and substance use, those who exchange sex are at a higher risk of contracting or transmitting HIV or other STDs. Those who trade sex on a regular basis as a source of continued revenue are more likely to contract HIV compared to those who do so infrequently. Escorts, people who work in massage parlors, brothels and the pornographic film industry, exotic dancers, state-regulated prostitutes, and men, women, and transgender people who participate in survival sex are instances of people who engage in risky sexual behaviors.

Different social constraints

Since the beginning of the HIV pandemic in 1981, there have been documented discrimination against people with HIV, both connected and unconnected to health services. Discrimination is the unfair treatment of people because they belong to a particular group or category. It is frequently associated with stigma, but it differs in that it addresses actual conduct toward the individuals afflicted, excluding or restricting them from opportunities available to other groups. Some healthcare personnel, for instance, have been reported to be reluctant to give adequate services. African migrants living with HIV reported hearing from healthcare staff that immigrants from developing countries can't access any HIV treatment. Stigma and prejudice in the medical environment impede people from obtaining HIV prevention, diagnosis, and treatment services and from embracing preventative practices.

In the Central and Eastern Europe region, the needs and objectives for achieving the Sustainable Development Goals of the 2030 Agenda for people living with HIV and STDs are highly vulnerable to discrimination according to the United Nations. Discrimination in this

³² **Shelter:** a building designed to give protection from bad weather, danger, or attack (Cambridge Dictionary, 2022).

area has taken many forms, including invasions of privacy and confidentiality, forced disclosure³³ of HIV status, pressure on HIV-infected couples to make specific fertility-related judgments, refusal of assistance to HIV and STI-positive women during labor, and denial of the right to parenthood. While these are crucial concerns for PLHIV who need unbiased reporting and nonjudgmental support, it has also been demonstrated that healthcare personnel's attitudes toward their HIV-positive patients' sexual and reproductive health may influence the actual services provided. This has been exacerbated directly or indirectly by discrimination against the various marginalized sectors afflicted by stigmatization. For instance, persons belonging to the sex industry, inmates and members of the LGBTIQ+ community.

Lack of awareness

The European Center for Disease Prevention and Control offers an overview of European HIV response successes and gaps, highlighting how nations addressed the HIV epidemic in 2016 based on their commitment set forth in the Dublin Declaration on Consurtium³⁴ to Fight HIV/AIDS in the Central and Eastern Europe region. The findings show that HIV treatment begins earlier in the CEE region and that more people receive life-saving treatment. However, one in every six people in CEE who have been diagnosed with HIV is still not receiving treatment. Those who are on medication, on the other hand, demonstrate how effective current HIV treatment is: nearly nine out of ten people living with HIV who are on treatment are virally suppressed. This means the virus can't be identified in their blood and they can't spread it to others.

A lack of awareness among young people about how to use proper protection to avoid STD infection has resulted in 1 million people becoming infected every day. There are 18,000 new cases every year in Eastern Europe. Young adults are the most commonly infected, and some of these cases are the result of sexual assaults. The failure to control STDs is due to a dearth of interest in treatment strategies that focus on unrealistic diagnostic requirements rather than practical decision-making requirements. This led to having no control over patients who don't know they are infected, have sexual relationships, and end up infecting

³³ **Disclosure:** something that was not previously known, or the act of giving such information to the public (Cambridge Dictionary, 2022).

³⁴ **Consortium:** an organization of several businesses or banks joining together as a group for a shared purpose (Cambridge Dictionary, 2022).

more people. The lack of national and local campaigns and the lack of sexual education that young people receive in and out of school.

The lack of sexual information that young people receive in school leads them to have sexual relationships without any protection. Young people don't have enough information on how to avoid getting STDs. In one study, 204 women were examined after a sexual assault, and 43% were found to have STDs. In 2013, 385,000 cases were reported in Europe, according to UNAIDS, and the numbers have grown ever since. One of the major causes of these cases is the economic changes; unemployment has led people to become sex workers, and social conditions support the development of these epidemics.

Dearth of education systems

There is little dispute that the epidemiological pattern of HIV infection in Central and Eastern Europe is changing. In a number of Western European countries, the number of new infections detected each year as a result of sexual or injection-related spread is beginning to decline. At the same time, alarmingly high rates of infection remain among members of highly vulnerable and socially marginalized populations. The incidence of new HIV infections is increasing throughout Central and Eastern Europe, partially as a result of the economic and social liberalization³⁵ that followed the end of the communist period and moreover due to a lack of governmental commitment to HIV prevention.

The attitudes of national authorities toward HIV-positive marginalized groups vary dramatically across Europe. Not only are vulnerable groups at a disadvantage in terms of treatment access, but proper knowledge and education are frequently lacking. Members of migrant groups frequently consult health care providers only when they are already dangerously ill, due to a lack of information about the benefits of early diagnosis and treatment. Stigma and discrimination continue to be formidable impediments to the dissemination of accurate information and education.

Prejudice and a conservative social agenda, combined with an early lack of awareness about the infectious essence of this viral disease, including the distinctions between the natural path of HIV infection and those of other infectious diseases, resulted in a series of missed opportunities to implement effective large-scale prevention programs. The same

³⁵ **Social liberalization:** the practice of making laws, systems, or opinions less severe and allowing more freedom in laws, systems, or opinions (Cambridge Dictionary, 2022).

circumstances fueled a protracted political discussion on acceptable solutions to the pandemic, a debate that continues to this day, albeit on various levels, after twenty-five years of HIV/AIDS in Europe. The fact that the availability of effective HIV prevention and treatment remains severely constrained in many countries demonstrates the continued harmful impact of political and ideological pressures. Condoms, harm-reduction services for injecting drug users, and sex education for young people both inside and outside of school should be basic prevention measures, while highly active antiretroviral medication, whose efficiency has been thoroughly proven, should be made generally available to those living with HIV/AIDS. Few medical procedures that have been demonstrated to be effective have ever been restricted in the way that antiretroviral therapy has.

The United Nations Programme on HIV/AIDS response

According to the UNAIDS Global AIDS Update: At threat, 160 000 new HIV infections are expected in Central and Eastern Europe in 2021, representing a 48% rise from 2010. Despite increased HIV treatment prevalence and the availability of novel preventative approaches and efforts to reduce opportunistic infections, the number of AIDS-related fatalities in the region in 2021 will be 32% greater than in 2010. According to UNAIDS, 54% of new HIV infections in the region in 2020 would be at a late stage, a 10% increase from 2018. All countries outlaw HIV transmission, exposure, and non-disclosure³⁶. While most countries have decriminalized same-sex sexual interactions, there is still a widespread stigma against homosexual men as well as other men who have sex with men.

Sexual assault is a violent crime that affects both men and women around the world; therefore, sexually transmitted diseases can be acquired during a sexual assault. In 2015, 80,000 sexual assaults were reported, and these victims must undergo a physical and laboratory diagnosis to discard STDs. The estimated annual number of new cases in Eastern Europe between the ages of 15 and 49 is 18,000. STDs may result in complications such as infertility, ectopic pregnancy³⁷, cervical cancer, premature mortality, congenital syphilis, fetal wastage, low birth weight, prematurity, and ophthalmia neonatorum. The Joint United Nations Programme on HIV/AIDS, concerned with the advance of the HIV/AIDS epidemic in the

³⁶ **Non-disclosure:** a situation in which information is not made known to others (Cambridge Dictionary, 2022).

³⁷ **Ectopic pregnancy:** the development of the embryo outside the usual position within the womb, usually inside one of the fallopian tubes (Cambridge Dictionary, 2022).

world, has led UNAIDS to bring together the resources of 10 UN organizations in response to AIDS to help the world prevent HIV. This program's mission is to prevent the advance of HIV, to offer treatment and assistance to people who battle with the disease and to reduce the vulnerability of HIV/AIDS in communities.

Since HIV/AIDS was discovered, dozens of medicines have been developed. Different drugs work against HIV, and when they are combined with other treatments, they are more effective. Combination therapy with at least three medications is now the standard treatment for all newly diagnosed patients. Antiviral therapy halts HIV from spreading and can suppress HIV to undetectable levels in the blood; this allows the person to recover and reconstruct their immune system. Currently, there are 23.3 million people worldwide on HIV treatment. A person who starts antiviral therapy can have the same life expectancy as an HIV-negative person of the same age. The effectiveness of the treatment is monitored by measuring the amount of HIV in a person's blood; if the virus can't be detected, it means that their HIV infection is likely to advance and they are at no risk of transmitting the disease to their partner.

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Glosary of Forbidden Words

Forbidden Words

Defined by the United Nations, are non diplomatic terms participants must avoid to mention during their speeches on the debate and in the writing of resolution proyects.

Forbidden Words	Permitted equivalents
First world countries	Developed countries
Third world countries	Developing countries
Gay	Member of the LGBTIQ+ community
War ³⁸	Belic conflict
Rape	Sexual Harassment
Terrorist ³⁹	Extremist
Kill or murder	Deprive someone of their life
Death	Casualties
Assassination	Homicide
Army	Military forces
Money	Economic resources
Poor	Lack of resources
Okay ⁴⁰	Yes or agree
Black ⁴¹	African American

³⁸ The word war can be used in order to refer to historical contexts, such as the Cold War, the First World War, etc. It can only be used in the Historical Security Council to refer to armed conflicts.

³⁹ Only the Counter-Terrorism Committee can make use of the term terrorist and its variants.

⁴⁰ Is the only forbidden word in the Caribbean Court of Justice.

⁴¹ The word black, with regard to race, is not forbidden but it is recommended to limit its use and refer to this sector as African American or Afrodescendants.

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Glossary for Resolution Projects

Preambulatory Phrases

Preambulatory Phrases are used at the beginning of every Resolution Paper in order to give context about the resolutions made for the topic. Preambulatory Phrases must be written in italics followed by a sentence that gives said context. For each Resolution Paper there must be five sentences beginning with a Preambulatory Phrase.

Affirming	Desiring	Noting with deep concern
Alarmed by	Emphasizing	Noting with satisfaction
Approving	Expecting	Noting further
Bearing in mind	Expressing its appreciation	Observing
Believing	Fulfilling	Reaffirming
Confident	Fully aware	Realizing
Contemplating	Further deploring	Recalling
Convinced	Further recalling	Recognizing
Declaring	Guided by	Referring
Deeply concerned	Having adopted	Seeking
Deeply conscious	Having considered	Taking into consideration
Deeply convinced	Having examined	Taking note
Deeply disturbed	Having received	Viewing with appreciation
Deeply regretting	Keeping in mind	Welcoming

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Glossary for Resolution Projects

Operative Clauses

Operative Clauses are used at the beginning of every resolution within the Resolution Paper on the debated topic. They must be written in italics and bold.

Accepts	Endorses	Notes
Affirms	Draws the attentions	Proclaims
Approves	Emphasizes	Reaffirms
Authorizes	Encourages	Recommends
Calls	Expresses its appreciation	Regrets
Calls upon	Expresses its hope	Reminds
Condemns	Further invites	Requests
Confirms	Further proclaims	Solemnly
Congratulates	Further reminds	Affirms
Considers	Further recommends	Strongly
Declares accordingly	Further requests	condemns
Deplores	Further resolves	Supports
Designates	Has resolved	Takes note of
		Transmits
		Trusts