Scope of the Problem
Since 2003 the global crisis of HIV/AIDS has changed its scope in terms of gender, with more women affected by HIV/AIDS than men. HIV (Human Immunodeficiency virus) is a virus that is transferred from direct human-to-human exchange of bodily fluids such as blood, semen, vaginal fluid and breast milk. The virus leads to AIDS (Acquired immunodeficiency syndrome), which causes failure of the immune system. HIV/AIDS is most rampant in developing nations and sub-Saharan Africa as a result of the low standard of living and poverty. Although those areas are most prone to the virus, it is still recognized as a pandemic, which affects the entire global population. After first being acknowledged in 1981, the WHO estimates over 25 million people have died from HIV/AIDS and that 0.6% of the world's population are currently infected with it today, a majority of which are women. HIV/AIDS is a consistently discussed issue at the United Nations, as the multifaceted and serious nature of the epidemic requires constant and dedicated action by the international community.

History of the Issue
When awareness of HIV/AIDS first emerged, it was thought that the virus marginally affected women, as early statistics depicted men as the primary victims. Since then, the virus has been proven to affect people of all genders, races, classes, and sexual orientations. Although no demographic is fully immune, the rise of female contraction of HIV/AIDS is extremely troubling. The majority of female HIV/AIDS cases are from the Global South. Many theories exist to why this is the case, and the main ones can be categorized in physiological, social and economic explanations. Physiologically, women are more susceptible to microlesions than men and also men's semen is far more concentrated with the virus than the secretions of women. Furthermore, young women, due to the nature of their physiological development cycle, are more susceptible to microlesions than older women. Socially, the inequality between men and women within the Global South also leads to higher rates of infection. In many third world countries women are not thought of as equal to men and this has prevented them from attaining education on the virus and treatment. As well they are more prone to acts of sexual violence and therefore the transfer of the virus through sex. Domestically violence is prevalent in all ages and countries and often is attributed with sexual abuse. Economically, the widespread support of condom distribution has been helpful in preventing transfer of the virus, but in sub-Saharan Africa poverty issues have made it difficult to facilitate and
promote attendance in sexual education programs, which has contributed to the high infection rate in that region. Further, the instability and insecurity that comes with the ongoing conflicts present in many sub-Saharan countries increases the prevalence of a lack of education, inability to distribute medical supplies, and sexual violence. For example, clinical data shows that in the Sudan the HIV rates of expectant mothers were 6-8 times higher than that of non war-torn countries.

Possible Solutions

Education is one of the most important aspects pertaining to the prevention of the spread of the HIV/AIDS virus. However, education is difficult in the Global South for young women to access. As schools or programs run by civil society are the primary means of sexual education, the barriers preventing females from accessing them are significant factors for the rise of female HIV/AIDS. Thus, alleviating these economic, social, and political barriers would be monumental in mitigating future levels of female HIV/AIDS contraction. This committee also has the burden of how to deal with the effects of the current female HIV/AIDS epidemic. The role of women in the Global South tends to be that of the family care provider (although generalizations may not always be accurate), and are responsible for looking after domestic or familial responsibilities. This work is often unpaid and thus women are unable to generate additional income or provide them the ability to deal with living or handling a family member with HIV/AIDS (i.e.: Husband). Addressing the feminization of poverty and disempowerment of women will be fundamental in responding to the challenges related with female HIV/AIDS epidemic.

Points of Contention

The Global Coalition on Women and AIDS established in February 2004 has provided some guidelines to preventing the increasing spread of HIV/AIDS especially in women; these guidelines must be put in place to deal with this extremely important and urgent issue:

How do we prevent the spread of HIV infection among girls and women?
How do we reduce violence against women?
How do we protect the property rights of women and girls?
How do we ensure equal access to care and treatment for girls and women?
How do we provide improved community-based care with special focus on women and girls?

How do we promote access to prevention options for women, including microbicides and female condoms?

How do we support ongoing efforts towards universal education for girls?

This coalition provides us with a lot of great ideas, but a lot of questions to be answered in terms of HIV/AIDS: Empowerment of Women.
Resources

http://www.un.org
a good starting point to learn more about the UN and its bodies as well as a start to research the actions taken by the UN on HIV/AIDS.

http://www.unifem.org/
The official UN Development Fund for Women site working for women’s empowerment and gender equality.

http://www.reproductiverights.org/pdf/pub_bp_UNGASS.pdf
A detailed article on some of the actions the UN has taken on AIDS.

A great detailed analysis of the HIV/AIDS: Empowerment of Women question, which expands on the details provided in this background paper.

http://video.google.com/videoplay?docid=515726758468713128&ei=Sb4GSczfMf3eqAOJrtT2Dw&q=HIV%2FAIDs+AND+Women
A video documentary of the HIV/AIDS crisis and how it deals with women.