

# Hiv aids proposal for change

[Family](#)



## **HIV/AIDS Proposal for change**

Proposal for Change The study of various research reports suggests that youth, worldwide, severely lack adequate knowledge of HIV AIDS necessary to protect them from the disease. Hence, youth are one of the most vulnerable groups, followed closely by women (Baldwin, 2009). Moreover, it has been identified and reported that youth generally lack proper tools to address the public health issue; therefore, the number of cases of HIV / AIDS within this group is on the rise. Specifically, proper tools include HIV / AIDS education throughout the world's school systems, which should include making youth aware of HIV / AIDS cases related to the shared use of needles and how the deadly virus can spread by coming into contact with an infected person's blood or bodily fluids, as well as free access to condoms (Baldwin, 2009). Without a cure, it is most likely impossible to completely rid the world of HIV / AIDS; however, with the help of rapidly developing technology and collaboration with global planners, caregivers, and health care policy makers, programs can be created and awareness spread to greatly reduce the annual number of cases among not only members of this group, but overall (Baldwin, 2009). By focusing on the underlying issues that make youth vulnerable to the disease, the number of annually reported new cases will inevitably decline. For example, establishing social coalitions, setup with the intent to lessen the impact and vulnerability of infected persons, can go a long way in ultimately addressing the issue. For this to become a reality, it is necessary for social care groups to work in tandem with health care providers. Together, with authorities as an ally, they can help to ensure violence, explicitly incidences of sexual abuse where women and children

are the victims, are consistently punished to the highest extent of the law; successful execution of this strategy should result in greater protection of this group from contracting the disease. Youth contract HIV / AIDS in a number of various ways. Eliminating or, at the very least, reducing the prevalence of the underlying vulnerabilities, will help to reduce this overall public health problem that plagues the entire world (Baldwin, 2009). The three most common ways young people contract the disease, according to Baldwin (2009), are: consenting to sexual activity—between the ages of 15 and 24; molestation and other forms of sexual abuse—discovered to occur most frequently among orphaned children; and mother-to-child transmission (MTCT)—particularly when the mother is not undergoing any sort of antiretroviral treatment. Change must occur, without neither exception nor compromise. According to a United Nations (UN) Press Release (2008), the number of HIV-positive pregnant women receiving treatment in the form of antiretroviral medications in 2005 was at only 14%. However, with increased awareness and availability of treatment options, that number increased by 19% in just two years, reported at 33% in 2007 (How HIV/AIDS affects Children and Youth, para. 3). Research has revealed that such intervention methods within the expected baby delivery window can reduce the chances of MTCT by approximately 50%, in most cases (Baldwin, 2009). While the percentage of expecting mothers who are infected with HIV or AIDS to receive treatment in the form of antiretroviral drugs has continued to climb steadily to present, there are still some who claim the benefits are not worth the costs. Baldwin (2009) states, “[d]espite the argument that provisions of these treatments are not economically feasible, compared to the long-term costs of treating new HIV patients, combined with the loss of future

economic and social growth, the costs of preventing MTCT is relatively inexpensive” (How HIV/AIDS affects Children and Youth, para. 4). It is unbelievable that there are people in the world who do not see a benefit, such as the reduction of newly infected children between 2005 and 2007 from 410, 000 to 370, 000 respectively, as being worth the comparably low cost of prevention (UNAIDS, 2008). The focus of the war on HIV / AIDS must be on each individual battle. Until a cure is discovered, if ever, other strategies must be implemented to reduce the number of new cases reported among all vulnerable groups (i. e. women and youth). Baldwin (2009) reports appalling statistics regarding breakdowns of infected individuals as of 2009. It is estimated that 40% of HIV-positive individuals, worldwide as of 2009, were between the ages of 15 and 24. Furthermore, 75% of HIV-positive individuals in sub-Saharan Africa, as of the same period, were women within this age range (Baldwin, 2009). Research has provided the details, as far as what, and who, to look for; it is now up to everyone to take action. Enforcement of human rights violations and pressure on politicians and other government and law officials for implementation of rights-based approaches to HIV / AIDS prevention, awareness, and treatment must be achieved at the government level (Baldwin, 2009). However, without sufficient vocalization from social groups and individuals pulling together and uniting for the cause, effective changes may never be made. However, if the big problem is chipped away one issue at a time, not much will remain to fight for. References Baldwin, J. (2009). The impacts of HIV/AIDS. Parliamentarystrengthening. org. Retrieved from <http://parliamentarystrengthening.org/HIVmodule/pdf/unit2.pdf> UNAIDS. (2008). Caribbean regional launch of UNAIDS global report <https://assignbuster.com/hivaids-proposal-for-change/>

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