International government organizations with a global outreach are working on global health issues to achieve the objective of “Health for All”. The key actors in global health working on global health problems are the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the Joint United Nations Program on HIV/AIDS (UNAIDS) (Johnson, Stotskopt, & Shi, 2018). These international organizations participate in generating and sharing knowledge, engage in advocacy, provide global funds for health efforts. Our paper will analyze the structure, goals, and processes of global health organizations, UNESCO and UNAIDS.

Introduction:
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The United Nations Educational, Scientific and Cultural Organization (UNESCO):
UNESCO is a branch of the United Nations (UN) that specializes in child health. The headquarters of the organization are located in Paris (Johnson, Stotskopt, & Shi, 2018). The organization was formed in 1946 (Johnson, Stotskopt, & Shi, 2018). The purpose of UNESCO is to ensure the health of children through international collaboration and transformational reforms in health care education and socio-cultural determinants of health (Johnson, Stotskopt, & Shi, 2018). Justice and equality for all children irrespective of their country of origin is the mission of the organization. Being an international government organization, the development objectives, include the Millennium Development Goals (MDGs)—that underpin all UNESCO strategies and activities (Johnson, Stotskopt, & Shi, 2018).

Mission and Vision:
UNESCO’s mission is to ensure health care education, school education, scientific advancement and cultural development in children (Johnson, Stotskopt, & Shi, 2018). UNESCO’s interdisciplinary approach includes a universal immunization program to ensure protection against all preventable diseases (Johnson, Stotskopt, & Shi, 2018). Public health programs focused on HIV prevention are encouraged by UNESCO. These public health
programs are organized in alignment with the cultural norms of the society to increase the outreach of the programs. Community awareness is created by media campaigns. The target population is informed about the prevention strategies against infectious diseases as part of health promotion programs (Johnson, Stotskopt, & Shi, 2018).

**Operational System, Strategy, Contribution:**
The focus of the new strategy of UNESCO is to promote the health of children. UNESCO's education sector agenda is to organize more health prevention programs on AIDS to end the prevalence of the disease by 2030 (UNESCO, 2018). UNESCO's strategy is to use health education and promotion programs as a weapon against the AIDS epidemic (UNESCO, 2018). Prevention is better than cure. Based on this theme UNESCO has introduced sex education in schools and colleges to ensure the well-being of the target population. Health education will help to achieve Sustainable Development Goals related to deprived population segments (UNESCO, 2018).

UNESCO's highest priority is to provide sex education to adolescent children in schools that include HIV education. UNESCO has provided guidelines to all school districts to provide safe learning environments to children irrespective of caste and race. UNESCO has combined school education with health education as an integral part of the school curriculum to ensure well-being of children. Health services have been linked to schools to ensure the growth and development of children in a regulated environment. An interdisciplinary approach combining the school education system with health care services will help to reinforce the mission of UNESCO at the grass-root level. Education will help to combat discrimination and ensure justice and equality for all.

Sexual and reproductive health should be promoted through a safe, inclusive and non-discriminatory learning environment. HIV education through the school education system will help to promote better health. Good nutrition, safe drinking water, immunization, better hygiene practices, and sex education will help to promote human rights and gender equality in rural areas (UNESCO, 2018).

**UNESCO and Global Health:**
UNESCO covers 197 countries and territories in the following regions: Eastern and Southern Africa, West and Central Africa, Middle East and North Africa, South Asia, East Asia, and Pacific, Latin America, Caribbean, Central, and Eastern Europe, and industrialized countries (Johnson, Stotskopt, & Shi, 2018). The population covered includes a wide range of demographic groups primarily: newborns, infants, children under five, school-age children, adolescents (Johnson, Stotskopt, & Shi, 2018). The areas of focus include child survival, child health, maternal health, nutrition, immunization, water and sanitation, HIV/AIDS, education, child protection, adolescents, early childhood development (Johnson, Stotskopt, & Shi, 2018). UNESCO is supported entirely by the voluntary contributions of individuals, foundations, corporations, non-governmental organizations, and governments. The agency is funded by the world health organization (WHO). UNESCO uses global funds to achieves its objectives and goals.

UNESCO is involved in global policy development of health issues focused on children. The organization protects the rights of children and their well-being. The organization monitors global progress towards international goals and objectives. Indices for assessment include child mortality rate, drinking water problems, sanitation, and hygiene issues in both developing and developed countries (Johnson, Stotskopt, & Shi, 2018). The child survival indices include the under-five mortality rate, infant mortality rate, neonatal mortality rate. Water and sanitation program includes use of improved drinking water sources, use of improved sanitation facilities. Immunization program focuses on the estimate of national immunization coverage on tuberculosis, diphtheria, pertussis, tetanus, polio, measles, hepatitis B, and tetanus (UNESCO, 2018).

**Success:**
Key outcomes for UNESCO include: Health promotion programs focused on HIV education, prevention, and treatment have been successful in promoting HIV awareness among the target population (UNESCO, 2018). UNESCO programs have strengthened puberty education. The programs have brought awareness about contraceptive measures to prevent teenage pregnancies and septic abortions. The programs have been successful in creating awareness about healthy and safe sexual relationships (UNESCO, 2018).

**Strengths, Limitations, and Recommendations for Improving the Outcome:**
As compared to other organizations, UNESCO strives for vulnerable and deprived population and is committed to global community health (Iriye, A., 2002). The strength of the organization is its broad coverage on global health.
issues focused on children and the weakness is their global database is not accurate since the health indices collected in developing countries are not accurate (Iriye, A., 2002). The agency should develop more comprehensive programs to collect data in developing countries to maintain the data integrity of current researches. Besides, global health leaders must expand scientific research to explore more workable solutions for the deprived.

The Joint United Nations Program on HIV/AIDS (UNAIDS):
The Joint United Nations Program on HIV/AIDS (UNAIDS) was founded by six co-sponsors in 1996 (Johnson, Stotskopt, & Shi, 2018). UNAIDS co-sponsors include the World Health Organization, World Food Program, World Bank, UN Women, United Nations Office on Drugs and Crime, United Nations Population Fund, United Nations Educational, scientific, and cultural Organization, United Nations Development Program, UNICEF, the office of the United Nations High Commissioner for Refugees, an international labor organization (Johnson, Stotskopt, & Shi, 2018). UNAIDS headquarters is in Geneva and has 22 offices in various countries. UNAIDS is a global agency and the key area of operation is HIV/AIDS (Johnson, Stotskopt, & Shi, 2018).

Mission and Vision:
The mission of UNAIDS to develop multisectoral effort and collaboration to prevent HIV transmission, and to provide therapeutic care to the affected population and reduce vulnerability to HIV/AIDS (Johnson, Stotskopt, & Shi, 2018). UNESCO's key areas of operation to alleviate the HIV/AIDS epidemic include research and development, global health policy formulation, and advocacy (Johnson, Stotskopt, & Shi, 2018). UNAIDS's vision is to integrate HIV/AIDS prevention and treatment strategies with their current strategic priorities (Johnson, Stotskopt, & Shi, 2018).

Operational System, Strategy, Contribution:
UNAIDS has developed a surveillance system to monitor and evaluate the HIV epidemic to better understand the trends of the disease (Maheu-Giroux et al., 2017). UNAIDS monitors the global response to AIDS to engage stakeholders in the fight against HIV/AIDS (Maheu-Giroux et al., 2017). UNAIDS promotes research and development of new therapeutic agents and vaccines as part of the global agenda. UNAIDS helps in mobilizing global funds and resources to build a strong infrastructure for health care (Maheu-Giroux et al., 2017).

UNAIDS and Global Health:
UNAIDS assists countries in developing and implementing a national AIDS plan. UNAIDS action plans focus on countries with a high burden of AIDS, particularly sub-Saharan countries (Maheu-Giroux et al., 2017). UNAIDS assists countries in building their infrastructure and mobilizing resources to fight against HIV/AIDS. UNAIDS also help these countries with global funds for successfully running planned operations in the target areas. UNAIDS helps the countries to strengthen their surveillance and monitoring system during the epidemic. UNAIDS promotes health education and community awareness programs to fight health illiteracy (Maheu-Giroux et al., 2017). UNAIDS emphasizes on prevention programs. UNAIDS is investing funds to increase the supply of antiretroviral drugs in areas facing the problems of lack of medication supplies. UNAIDS is promoting the vaccine development program to combat the epidemic crisis. UNAIDS is also focusing on the problems of TB/HIV co-infection. UNAIDS is further putting efforts to broaden the panel of stakeholders by the development of international agreements and conventions (Maheu-Giroux et al., 2017).

Success:
UNAIDS has developed a UNAIDS estimation and projection package (EPP) tool to predict and project the trends of HIV spread during the epidemic (Maheu-Giroux et al., 2017). EPP generates a prevalence output file to assess HIV incidence, prevalence, and deaths in the affected areas. EPP tool helps to assess the HIV impact (Maheu-Giroux et al., 2017).

UNAIDS has achieved significant success in meeting the prevention needs in Senegal, Thailand, and Uganda (Maheu-Giroux et al., 2017). UNAIDS ideology is to translate the link between behavioral change and declining infection rates into strong support for prevention efforts where they exist, and for the creation of new ones where they are currently lacking (Maheu-Giroux et al., 2017).
Strengths, Limitations, and Recommendations for Improving the Outcome:
The strength of UNAIDS is the global leadership in response to the epidemic and the limitation is a global consensus on policy and programmatic approaches are still to be achieved. Our paper recommends advocating greater political commitment in response to the epidemic at the global level.

Conclusion:--
Cooperation among the key organizational actors in global health activities should be promoted to achieve better health outcomes. Global development can be achieved by promoting advocacy work as well as research on global health policy. Collaboration and inter-sectoral cooperation among various countries with the commitment to achieve the millennium development goals will support the mission and vision of UNESCO and UNICEF as global health actors for advancing global health development all over the world (Iriye, A., 2002).

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