

- Progress on MDG 5 lags far behind the agreed targets. Over a period of fifteen years, between 1990 and 2005, the maternal mortality rate has declined by only 1 % per year instead of the required 5,5%. Too many women are dying unnecessarily because of inadequate health services. This fact is unacceptable and calls for immediate and concerted action.
- The Netherlands calls for more attention for the great and rapidly growing gap between demand and supply when it comes to family planning. For each of the eight MDGs significantly more progress could have been reached if access to contraceptive information and supplies had been better. Putting it more forcefully, the MDGs will definitely not be achieved as long as family planning services are not widely available and unintended pregnancies are not prevented. The reports of the Secretary General for this CPD very accurately illustrate that:
- MDGs 4 and 5: The most obvious progress could be a 20% reduction in maternal mortality and 10 % reduction in child mortality. MDG 6: Access to sexuality information and to male and female condoms seems a neglected, yet very cost effective approach also for advancing MDG6. Voluntary Counselling and Testing occurs late in the HIV-prevention sequence; lets try to prevent that more people become infected and need treatment. MDGs 2 and 3: More difficult to measure yet definitively crucial is the contribution of family planning to improve a girl's opportunities to finish secondary school. And when you add up all above reasons, plus the demographic and macro-economic effects of all individual reproductive choices together, MDGs 1 and 7 come into play.

NETHERLANDS EFFORTS

- Recently, the NL further increased its efforts to improve sexual and reproductive health worldwide, with a focus on prevention and on the human rights dimension. Prevention of HIV/AIDS, of unwanted pregnancy and of unsafe abortion, require that women and girls are in a position to decide freely and responsibly about their own bodies and sexuality. Enabling people to exercise their rights is therefore an essential aspect of any preventive policy. Prevention, in large part, is about young people. If we

engage them today, we increase their chances of a healthy sexual and reproductive life tomorrow.

- The pragmatic and inclusive approach to HIV/AIDS and Sexual and Reproductive Health and Rights that we take in our country has resulted in the lowest numbers of teenage pregnancies and abortions in the world. Our programmes for sexuality education are not restricted to the prevention of infectious diseases but also convey a positive view of sexuality and sexual relations free of coercion.
- The Netherlands will vigorously continue to advance and support the implementation of the Cairo Agenda with particular emphasis on people whose voices are not always heard such as children and adolescents, the disabled, women in situations of violence, sex workers, sexual minorities, drug users and prisoners.
- The Netherlands remains one of the largest donors of UNFPA, UNAIDS, and the Global Fund, with an annual contribution of 280 million dollars. Of this amount, a substantial portion goes to the area of family planning, mainly through support to the Global Programme for Reproductive Health Commodities and to NGOs working in that area.