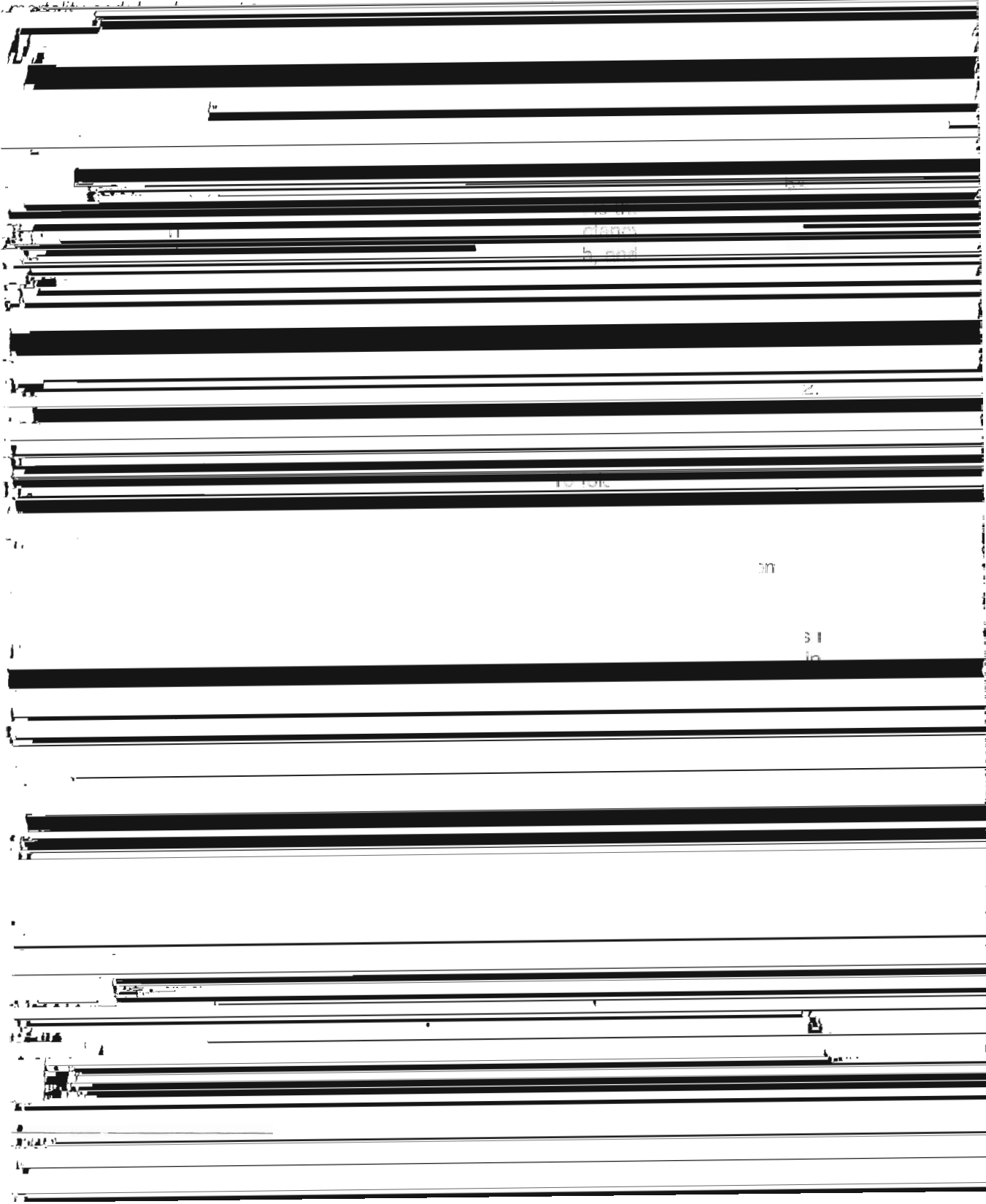


Mr. Chairman, Excellencies, Distinguished Delegates,

The Joint United Nations Programme on HIV/AIDS (UNAIDS) appreciates the opportunity to address the special theme of the 43rd session of the Commission on *Health, morbidity,*



This also undermines the spirit of the primary health care, which places emphasis of health care on people and their needs.

Mr. Chairperson,

With MDG of ERU, DUG related to health, the deliberations of the Commission this year are most relevant in the context of the upcoming GA High-level Plenary Meeting on MDGs in September. In the hardest hit countries HIV has undermined community resilience and international support networks, affected labor productivity and human capacity necessary to develop, produce and provision of health and social services. By the same token, there is a natural mutually supportive synergies between the AIDS response and other MDGs. The AIDS response must be leveraged with efforts to achieve the other MDGs. As the same time, other MDGs will help to move a multi-sectoral response to AIDS.

Let me share a few brief examples:

• **Gender equality and empowerment of women:** Gender equality and empowerment of women is a key to achieving the MDGs, particularly MDG 1 (eradicating poverty) and MDG 5 (improving maternal and child health). Women are more likely to invest in their children's health and education, and to use family planning services.

• **Universal primary education:** Education is a key to achieving the MDGs, particularly MDG 2 (universal primary education) and MDG 4 (reducing child mortality). Children with more education are more likely to use family planning services and to invest in their own health.

• **Maternal and child health:** Improving maternal and child health is a key to achieving the MDGs, particularly MDG 4 (reducing child mortality) and MDG 5 (improving maternal and child health). Children who survive to school age are more likely to be educated and to use family planning services.

• **Glacéarante efforts:** The Commission has been successful in mobilizing resources for AIDS response, particularly through the Global Fund and the President's Emergency Plan for AIDS Relief (PEPFAR). These efforts have been instrumental in reducing the burden of HIV/AIDS.

• **Health sector reforms:** The Commission has been successful in mobilizing resources for health sector reforms, particularly through the World Bank and the International Monetary Fund (IMF). These reforms have helped to improve the quality and efficiency of health services.

• **Microfinance:** Microfinance is a key to achieving the MDGs, particularly MDG 1 (eradicating poverty) and MDG 5 (improving maternal and child health). Microfinance provides small businesses with the capital they need to grow and create jobs.

• **50% reduction in child mortality:** The Commission has been successful in mobilizing resources for child mortality reduction, particularly through the Global Fund and the President's Emergency Plan for AIDS Relief (PEPFAR). These efforts have helped to reduce the number of children who die each year.

• **Prevention of mother-to-child transmission (PMTCT):** The Commission has been successful in mobilizing resources for PMTCT, particularly through the Global Fund and the President's Emergency Plan for AIDS Relief (PEPFAR). These efforts have helped to reduce the number of children who are born with HIV/AIDS.

• **Family planning:** The Commission has been successful in mobilizing resources for family planning, particularly through the Global Fund and the President's Emergency Plan for AIDS Relief (PEPFAR). These efforts have helped to reduce the number of unintended pregnancies and to improve the health of women and children.

• **Health sector reforms:** The Commission has been successful in mobilizing resources for health sector reforms, particularly through the World Bank and the International Monetary Fund (IMF). These reforms have helped to improve the quality and efficiency of health services.

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