



Check against Delivery

**United Nations Commission on
Population and Development**

***ICPD and MDGs:
Moving Forward***

Statement

by

**Thoraya Ahmed Obaid
Executive Director
United Nations Population Fund**

New York, 4 April 2005

Mr. Chairman, Members of the Commission, Ladies and Gentlemen,

Good morning. It gives me great pleasure to address the opening of this thirty-eighth session of the Commission on Population and Development.

Let me begin, Mr. Chairman, by congratulating you and the members of your Bureau on your election as officers to the Commission this year. I would also like to express my appreciation and congratulations to my colleague, Hania Zlotnik, as the new Director of the Population Division. I look forward to continued and strengthened collaboration between UNFPA and the Population Division.

It continues to be a privilege for me to work closely with Member States through the Commission to implement the Programme of Action of the International Conference on Population and Development.

Mr. Chairman, it is especially gratifying to be here following the resounding success of the tenth anniversary of the historic Cairo Conference. It is a success shared by all of us in this conference room. And it is a success for women, youth and men in countries aro

One of the quick wins endorsed by the 250 experts of the Millennium Project is to expand access to sexual and reproductive health services, including family planning and

capacity for commodity security, gender equality, women's empowerment and

Mr. Chairman,
We are making progress.

Today, I urge donors to remain on track to reach the 2005 target by living up to their commitments and continuing to increase funding levels as promised.

We need to ensure that family planning and reproductive health issues receive the attention they deserve. While increased resources are urgently needed to fight HIV/AIDS, it is important to allocate adequate resources to all areas of the ICPD population package in order to be more effective. This includes family planning, reproductive health, STD/HIV/AIDS and basic research, data, and population and development policy analysis.

There is also an urgent need to more fully link HIV/AIDS and sexual and reproductive health. Strong linkages between sexual and reproductive health and HIV/AIDS result in more relevant and cost-effective programmes with greater impact. Stronger linkages benefit from utilizing existing infrastructure for delivering maternal health, STI management, family planning and community-based outreach.

The report before the Commission on HIV/AIDS also points to the need to bring the same urgency that has been brought to the drive to expand treatment to re-intensify HIV prevention. As the old saying goes, an ounce of prevention is worth a pound of cure. In the absence of a cure or vaccine, prevention is the best and most viable approach to reverse, and ultimately halt, the epidemic.

UNFPA is committed to prevention, which must be the mainstay of any response. Prevention, care, treatment, and support are interlinked along a broad continuum, and their effectiveness is vastly improved when utilized together. We also fully support the Three Ones of UNAIDS:

1. One HIV/AIDS action framework that provides the basis for coordinating the work of all partners;
2. One national AIDS coordinating authority, and

One agreed country-level Monitoring and Evaluation system

It is clear that efforts to combat HIV/AIDS must also confront gender discrimination and violence. Today HIV infection rates are rising among women, especially young and married women, in all regions. They need the power and means to protect themselves.

Young people around the world must be provided with age-specific and gender sensitive sexual and reproductive health and HIV/AIDS education and services. Comprehensive condom programming must be an integral component of a range of HIV prevention strategies that include informed, responsible and safer sexual behaviour, including abstinence, postponing sexual début, and reducing the number of partners.

Looking longer term, we must address the underlying causes and consequences of the AIDS epidemic, including gender inequality, poverty, stigma and discrimination. We

must engage with marginalized groups, meet the needs of the most vulnerable, and ensure that programmes work together with populations most directly impacted by the epidemic.

To summarize, what we need is a more rigorous upholding of the universality of human rights, including respect for women and girls, young people, and vulnerable populations. We need greater action on evidence-informed strategies that have proven to work. We need to strengthen existing infrastructures to ensure greatest coverage and impact. In short, we need to translate our knowledge and commitments into concrete and effective action in each country, and in each community. Only then will we reach the targets we have set for ourselves.

Mr. Chairman,

In closing, I would like to stress UNFPA's commitment to make the right to development a reality. I would also like to inform members of the Commission that there will be high level meeting next week in Stockholm. In that meeting, we will discuss the progress of the implementation of the Sustainable Development Goals (SDGs) and the role of the United Nations in achieving them. We will also discuss the role of the United Nations in achieving the Sustainable Development Goals (SDGs) and the role of the United Nations in achieving them.

TD -r7t4ts h