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COUNCIL

H.E. MS. SYLVIE LUCAS

(LUXEMBOURG)

ECOSOC SPECIAL EVENT ON PHILANTHROPY AND THE GLOBAL PUBLIC HEALTH AGENDA

NEW YORK, 23 FEBRUARY 2009

It is indeed an honour for me to welcome you all today to the special event of

discuss how we can join efforts to accelerate progress towards achieving the healthrelated development goals.

In February of last year, the Economic and Social Council brought together for the first time representatives from the corporate sector and the philanthropic community to discuss, together with Member State Governments and civil society representatives, how stakeholders could work together to advance the achievement of the internationally agreed development goals, including the Millennium Development Goals (MDGs).

Council decided to focus the discussion on ways for Governments, the philanthropic community and other partners to engage in support of the global health agenda, in particular in two specific areas where we feel heightened attention is needed: improving the health outcomes of women and girls and neglected tropical diseases.

When world leaders gathered to adopt the Millennium Declaration in September 2000, they set a target date of 2015 to achieve the MDGs and bring about improvement in the lives of the poorest and most vulnerable worldwide, in particularly women and children. However, we now find ourselves halfway to that target date, yet lagging behind in our goal of achieving many of the MDGs. In particular, the health-related goals are far from being met, and at the current pace, will not be achieved until halfway through this century. However, we must bear in mind that achieving the health-related goals is pivotal to achieving all the other Millennium Development Goals.

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The Economic and Social Council, for its part, is charged with following up the implementation of the internationally agreed development goals, including the MDGs, and does this primarily through its Annual Ministerial Review (or AMR), held during the High-level segment of its substantive session each July. The AMR seeks to

development work, particularly the Millennium Development Goals. As you are

weeks ago on the contribution that traditional medicine could make to realizing global public health initiatives. Other key preparatory events being planned for the AMR will include national workshops and regional meetings over the course of the next two months. T

contribution to the Council High-

Excellencies, Mr. Secretary-General, Ladies and Gentlemen, lives of millions of men, women and children worldwide. We need an increased and sustained investment in health.

While many challenges are being faced in the area of global health, it is important to note that there has been some recent progress as well. For example, there have been reductions in child mortality, as well as gains in the treatment and prevention of HIV/AIDS, tuberculosis, malaria and some of the neglected tropical diseases. Aid for health has more than doubled in recent years, coming from both traditional as well as innovative sources. However, the economic consequences of the global financial crisis put these achievements at risk and will jeopardize progress on the challenges that remain.

We must therefore redouble our efforts to meet the challenges head on. We need to focus on areas of relative neglect or where progress has been weakest. This is why

Good maternal health is a key indicator of a high-quality health system. Ensuring healthy outcomes for children, including girls, has positive multiplier effects on social and economic development over the long-term. We also need to do more to raise the profile of neglected tropical diseases, which are largely treatable and preventable. They continue to affect more than 1 billion people throughout the world. Controlling and eradicating these diseases can also lead to a virtuous cycle with positive impacts on development.

Distinguished participants,

Partnerships are the cornerstone for advancing the Millennium Development Goals, and there is no doubt that these will not be reached by 2015 if we do not work together for their realization. Working together in partnership lies also at the very heart of the rec in my country, a

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public foundation which aims to promote private philanthropy in Luxembourg and play the role of an intermediary between public institutions and potential donors.

I am encouraged by the presence of representatives of the philanthropic community and by their willingness to engage more actively in the work of the Council. This kind of collaborative response has become a new paradigm of international cooperation in tackling emerging global challenges, including public health. I strongly believe that a multi-stakeholder approach has the potential to literally save millions of lives in a very short period of time. I hope that our deliberations today will yield many new and exciting ideas for collaboration in our efforts to promote the quality of life for the many impoverished and vulnerable people worldwide. I intend to make any key recommendations and proposals which may come -level meeting in July.

I would like to take the opportunity to thank the Department of Economic and Social Affairs and the UN Office for Partnerships for their leadership in co-hosting this event, together with our partners, the Committee Encouraging Corporate Philanthropy and the World Health Organization, as well as the various co-convenors who lend their support to this important cause.

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