



*Check against delivery*

## **2009 High-Level Segment of the Economic and Social Council**

### **Remarks by H.E. Ambassador Sylvie Lucas, Permanent Representative of Luxembourg to the UN President of the Economic and Social Council**

Mr. President,  
Mr. Secretary-General,  
Honourable Ministers,  
Excellencies,  
Ladies and Gentlemen,

It gives me great pleasure to welcome you all to the substantive session of the Economic and Social Council. It is a particular honour to have so many distinguished guests here with us today.

Since the beginning of the year we have collectively worked to bring to the forefront the challenges faced by the world community in the area of development. With the grim predictions of “the worst depression since the 1930s”, we were all too aware of the fact that maintaining momentum towards our development priorities in times of crises was not going to be easy. This is particularly true for the Millennium Development Goals in the area of global public health. We have seen in the past that social sectors suffer the most during crises.

The theme of this year’s Annual Ministerial Review “Implementing the internationally agreed goals and commitments in regard to global public health” is therefore particularly opportune and timely. In times of crises, maintaining our pledges to health goals becomes increasingly difficult, especially in developing countries across the world. Worse, the poorest and the most vulnerable are hardest hit, as they are the least likely to seek health care with even less resources at hand.

To address these challenges and bring forward concrete ideas for action to this session, we have engaged in an intense and broad preparatory process covering major aspects of the health and development agenda.

Let me begin with the role of partnerships and innovative approaches. The influx of innovative resources and multiple stakeholders has opened the way to novel structures, networks, partnerships and alliances beyond traditional health and development models. A special event on “Philanthropy and the Global public health agenda” was held in February to shed light on the role of philanthropy in health. Its critical role in addressing the challenges of maternal health and reducing child mortality, neglected tropical diseases as well as finding innovative ways of financing health systems to reduce the global burden of such diseases were thoroughly discussed.

We also discussed the valuable yet often neglected role of traditional medicines in the global public health agenda in another special event earlier this year.

In preparation for the AMR, various regional ministerial meetings have furthermore been organized over the last months, bringing forward specific regional health concerns. The first regional meeting, held in Sri Lanka, focused on the theme “Financing strategies for healthcare”. A meeting held in China addressed ways to promote health literacy. The Government of Qatar hosted a meeting on “Addressing non-communicable diseases and injuries”. The Latin American and Caribbean Ministers meeting in Jamaica addressed the theme of HIV and Development, whereas the regional meeting for Africa, which was held in Accra, focused on the topic of “e-Health - information and communication technology for health”.

While I would not like to preempt the presentations we will hear later this morning from the various regional meetings, allow me to point to some key messages, as I see them.

Firstly, governments need to take the lead in developing effective health systems. Their efforts must however be complimented by other stakeholders. Local communities, civil society organizations, philanthropists, the private sector, as well as international cooperation, in line with national systems and priorities, are all crucial factors for better, for more equitable health outcomes.

Secondly, more sustained investments are needed to support the health agenda. This includes fair systems of health financing, a well trained and adequately remunerated human workforce as well as a system of governance that ensures equity, participation and efficient use of resources.

Thirdly, the growing challenge of non-communicable diseases needs to be given high priority. NCDs and injuries cause 60% of the deaths globally. Cardiovascular diseases, diabetes, cancer and chronic respiratory diseases are shaving the health budgets not only in developed countries.

Fourthly, relatively modest investment in the fight against neglected tropical diseases (NTDs) would have an enormous effect and take a heavy burden off the shoulders of the most vulnerable, especially in developing countries.

Fifth, commitments made to combat the communicable diseases should be honoured. While progress has been made in dealing with HIV, TB and malaria, there is a continued need for vigorous action. The synergies between AIDS response and strengthening of health and social systems should furthermore be maximized. We should more particularly aim at eliminating the mother-to-child transmission of HIV by the year 2015.

Sixth, the ICT resolution offers tremendous potential for significant health outcomes. If rooted in a comprehensive national development strategy and health program, e-health can prove a very cost-effective way of making health care accessible.

Finally, multilateral approaches and international cooperation have the greatest potential for success. This has again been made absolutely clear with the emerging of new and unforeseen health threats and epidemics, such as most recently the H1N1 flu. Viruses know no borders and neither should we in promoting the health agenda.

While these global and regional meetings organized in preparation of the Annual Ministerial Review have offered broader perspectives, the National Voluntary Presentations we will hear over the next two days, provide an opportunity to focus on national success stories or unique challenges that a country is facing in achieving the MDGs. I would like to thank Bolivia, China, the Dominican Republic, Jamaica, Japan, Mali, Sri Lanka and Sudan for having taken the initiative of sharing their experiences with us.

I would also like to thank the Secretary-General for his initiative in convening a “Global Health Forum on Advancing global health in the face of crisis”, earlier last month.

Ladies and Gentlemen,

Real and measurable progress has been made in health outcomes, such as in the areas of HIV/AIDS, TB, and reduction in child deaths. Serious gaps remain however. Progress in maternal health is for instance negligible. This does also impinge on the health of the newborn child. Increased political will and commitment is therefore urgently required to eliminate the unacceptably high global rate of preventable maternal mortality and morbidity in order to ensure the full and effective implementation of our human rights obligations in this field.

The inter-linkages between health and other elements of the UN development agenda can also not be ignored. Good health will not be possible without clean water and sanitation. Climate change and environmental degradation are going to have negative impacts on our health goals if urgent action is not taken.

In order to truly address the challenges of health, we have to address the pervading inequities in health among and within countries. Most of the differences are attributable to the conditions in which people are born, grow, live, work, and age. Underlying problems of gender inequality are a crucial part of these inequities, reflected in the great differences in the health of women and girls who are often lagging behind men and boys. We must address the impact of the social determinants of health and establish effective social protection systems in order to ensure universal access to health care.

Excellencies,  
Ladies and Gentlemen,

Managing the risks and rewards of health and development is increasingly a critical challenge facing all stakeholders. A unique opportunity exists to maximize multi-stakeholder participation in promoting collaborative action on the global health agenda through the Economic and Social Council.

Accomplishing the health goals remains a daunting task for many countries as improving health outcomes is linked not only to the provision of health services but also to the active involvement of decision makers in sectors like education, agriculture, finance and foreign affairs, to name just a few.

We have made some progress in promoting a “whole-of-government” approach. But, strong follow-through, firm resolve and leadership are needed to keep the momentum. It is time now to help foster our common development objectives. It is time now to make this session and this Council count.

I thank you for your attention.