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**Statement by**

**H.E. Mrs. Agnes van Ardenne-Van der Hoeven,**

**Minister for Development Cooperation**

**of**

**the Kingdom of the Netherlands**

**on the occasion of the High-Level Meeting on HIV/AIDS**

**New York, 2 June 2006**

**Please check against delivery**

## You can't buy MDG 6

Thank you Mr President.

Excellencies, distinguished delegates, ladies and gentlemen,

1. One, two, three, four. I am counting four dollar bills in my hand. That is all it costs to prevent transmission of HIV during childbirth. To prevent newborn babies getting a death sentence.
2. Unlike five years ago, we now have the money to do it. That makes our failure all the more tragic. To prevent mother-to-child transmission, world leaders promised to treat 80 percent of infected mothers. No more than nine percent have been treated. There is no diplomatic way of putting it. This is outright neglect.
3. We have few reasons to celebrate and many reasons to be embarrassed: our efforts did not prevent four million new infections and three million deaths last year. Africa is at the centre of the storm – nearly one in twenty children there, members of the next generation, has been orphaned by AIDS. But it is now clear that we can't solve the AIDS crisis simply by throwing money at it.
4. The task at hand is to make that money work for people by building strong in-country capacity. Capacity of individuals, communities and institutions to fight HIV/AIDS themselves. This includes the capacity to conduct research into new preventive technologies and to set up health insurance schemes, which the Netherlands is now pioneering. But above all it means strengthening national health systems, the backbone of any successful AIDS response. Ultimately, national health systems can only be built on a solid foundation of national political will. Capacity for fighting HIV/AIDS should top not only the agenda of policy dialogues with donors, but also and in particular the domestic political agenda.
5. Taking their cue from national governments, all actors have the responsibility to take simplification and harmonisation seriously. If all they do is carry on as before, we will risk sending the entire AIDS response in a thousand different directions, draining the little

national capacity that does exist in Africa and elsewhere. That is why we should apply the principle of "the three ones" at country level: one action framework, one national coordinating authority and one monitoring and evaluation system.

6. When building up capacity to fight AIDS, the focus should be on prevention. If we do, half of all new infections could be prevented in the next few decades and 24 billion dollars in treatment costs could be saved. But attempts to step up prevention will only be effective if based on reproductive and sexual health and rights, and if grounded in evidence-based strategies, such as harm reduction, the use of microbicides, male and female condoms, and sex education to the youth - all very successful in the Netherlands. And to be truly effective, the fight must also be fuelled by our common humanity, regardless colour, culture or creed. This means providing people who are especially vulnerable with the special attention they need, such as women and girls, who are now more than anyone else at risk of infection.

Mr President,

7. The Secretary-General is right: we are standing at the crossroads. With all the money in the world we can not buy MDG 6. The only way to stop the biggest humanitarian disaster of our time is by combining commitment and coordination with crucial capacity. Let's all look in the mirror and ask ourselves the following question: what do we want to pass on to the next generation?

Thank you.