



International Organization for Migration (IOM)
Organisation internationale pour les migrations (OIM)
Organización Internacional para las Migraciones (OIM)

UN General Assembly Special Session High Level Meeting on AIDS

Statement by

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New York, June 10, 2011

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*Mr. President,
Excellencies,
Mr. Secretary-General,
Distinguished Delegates,
Ladies and Gentlemen,*

I am honoured to be present at this historic high-level meeting, and to address such a distinguished assembly on behalf of the International Organization for Migration.

As we have heard over the past two days, this is a critical moment for the international community as we reflect on our progress to date in reaching HIV, health and development goals, and strive towards a future with zero new infections, zero discrimination, and zero AIDS-related deaths.

To reach this bold vision set out by UNAIDS Executive Director Michel Sidibé, countries must focus their HIV prevention strategies on those who face the *highest* risk of HIV infection in their context, and they must ensure that HIV treatment, care and support services reach those who are currently *excluded* from existing programmes. HIV strategies must also begin to have an impact on the *social determinants* of health, and this requires cooperation *across sectors, across borders*, and with a wide range of partners. Nowhere is this more true than in the case of migrants.

Migration is a priority for virtually every nation in the world, with most countries experiencing internal migration as well as flows into and out of their countries. For many migrants themselves, migration is part of the search for a better life. Migrants number more than 1 billion worldwide and their remittances now outweigh official international development assistance in many countries. Given existing disparities and global demographic and labour trends, migration is not only inevitable, but if well managed, desirable and necessary, bringing needed migrant labour to drive economies and contribute to human development.

In this time of financial uncertainty and competing priorities, governments must ensure that their HIV responses reach those most in need. Lack of common definitions and data about migrant populations, and a tendency to group “migrants” together as though they were a

homogeneous group, mean those migrants who most urgently need HIV information and services are often overlooked in national and regional HIV strategies.

Migrants are *extremely* diverse and have varying levels of HIV risk and vulnerability depending on conditions throughout the migration process. Migrants in any one setting often include a mix of populations, such as immigrants from specific countries, ethnic minorities, returning overseas workers, and internal migrants. Though migrants globally are about half women and half men, this varies greatly across regions and sectors where migrants work. In some settings migrants face specific risks of sexual violence and exploitation. Emergencies create health challenges related to mass migration and displacement. National AIDS strategies must identify *which* migrants may be at higher risk of HIV infection, and ensure their access to services and information, regardless of their legal migration status. These strategies must be based on evidence, and must not reflect persistent stigma and discrimination about migrants and HIV, which can contribute to legislation and policies not based on public health, as in the case of HIV entry, stay and residence restrictions.

The health of migrants is a shared responsibility of origin, transit and destination countries. If we are to ensure *“the right of everyone to the enjoyment of the highest attainable standards of physical and mental health”* we must work together in partnership to ensure that migrants, irrespective of their legal migration status, also enjoy this right. Our strategies must be multi-sectoral, ensuring *“health in every policy”* and they must explicitly focus on migrants, including their living and working conditions. It is time that we begin *“promote migrant inclusive health policies and to promote equitable access to health promotion and care for migrants”* as called for in the 2008 World Health Resolution on the Health of Migrants. We must address barriers linked to migration status or documentation; low health literacy; lack of affordable, linguistically and culturally competent services; and xenophobia.

Migration trends will shape future global health challenges in increasingly diverse societies. No single government or organization can effectively manage the health challenges of migration alone, and HIV strategies that exclude migrants will not be effective. Today, I encourage you to *“remember the migrants”*. Remember that migrants must have access to HIV prevention, care, treatment and support if our goals are to be achieved.

