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SECRETARY-GENERAL URGES RENEWED COMMITMENT TO GENDER EQUALITY, REPRODUCTIVE HEALTH

RIGHTS, MARKING 15TH ANNIVERSARY OF CAIRO POPULATION AND DEVELOPMENT CONFERENCE

United Nations Population Fund Chief Says 1994 Conference Ignited

'Spark of Change', Placing Individual Needs at Centre of Development Agenda

At a General Assembly session commemorating today the fifteenth anniversary of the International Conference on Population and Development (ICPD), United Nations Secretary-General Ban Ki-Moon lauded that landmark meeting for sparking a shift in the international mindset on population issues and prodding Governments everywhere to recognize each individual's right to reproductive health.

"The Conference was a shining example of what the United Nations does like no other Organization in the world: be a pioneer in addressing global challenges and bringing Governments together to set international goals that go further than many countries would on their own," he said of the 1994 meeting, held in Cairo, Egypt. Delegations gathered there, affirmed for the first time that population was not about numbers, but about people and that women's health, education, employment and empowerment were the keys to a sustainable future.

Mr. Ban said the Conference's Programme of Action was also critical to global efforts to achieve the Millennium Development Goals, particularly reaching Goal 5, which aimed to cut maternal mortality and achieve universal access to reproductive health care. He called on all development partners to recommit to the Cairo Programme of Action until all its promises were fulfilled.

Thoraya Ahmed Obai, Executive Director of the United Nations Population Fund (UNFPA), agreed that the 179 Governments at Cairo had ignited a spark of change to improve people's lives by laying out a Programme of Action, which had helped link population growth with development goals and placed individual needs at the centre of development. The right to sexual and reproductive health and women's empowerment were crucial to that link, as universal access to reproductive health, including family planning, would speed up progress on the Millennium Goals, particularly the first target of ending extreme poverty.

Continuing, she said reproductive choices were central to gender equality and could influence population dynamics. The ICPD Programme of Action also called for the collection and analysis of population data to guide equitable policy decisions. Population data, if properly analysed and used, could provide a solid foundation for developing responsive policies and monitoring accountability.

General Assembly President Ali Abdussalam Treki said the work of the UNFPA had helped weave community concerns and goals surrounding population into national development strategies. The issues raised at the Cairo Conference continued to

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guide the international community as it addressed the problems that impacted the survival of women, safe maternal care, the protection of reproduction rights and the overall empowerment of women.

Today's event took place six years ahead of the 2015 target date for reaching the Millennium Goals, and five years before the completion of the 20-year ICPD Programme of Action. Participating ministers from around the world stressed the sustained importance of the issues raised in 1994 and many laid out their own efforts to meet the ICPD goals, including making family planning universally available by 2015, meeting agreed goals in education, and reducing infant, child and maternal mortality rates.

Sugiri Syarief, Minister of the National Family Planning Coordinating Board of Indonesia, said that her country was the world's fourth most populous nation, and as such, the Government gave great importance to population and development issues and the ICPD action plan was integral to its long- and medium-term development plans. Since the Cairo Conference, Indonesia had sharply reduced the number of people surviving on less than \$1 a day, thus achieving one of the Millennium Development Goals. Yet, some 9,800 women died each year due to complications with pregnancy and delivery, and Indonesia was implementing a maternal health programme to boost cost-effective access to maternal health services.

Agreeing, Haja Afsatou Olayinka, Sierra Leone's Minister of Fisheries and Marine Resources said that the ideas raised in 1994 remained valid and relevant in today's world. As a post-conflict and poverty-stricken country, Sierra Leone was characterized by high infant and maternal morality rates. Even with the current difficult economic situation, Sierra Leone remained unflinching in its support for the UNFPA. Universal access to reproductive health was needed to reduce poverty, as it increased prospects for higher investment in human development and food security, she said.

Speaking on behalf of the European Union, Joakim Stymne, State Secretary of Sweden, said the ICPD Programme and the 1995 Beijing Platform for Action adopted by the Fourth World Conference on Women, paved the way for a progressive approach to gender equality. Yet men and boys must become fully involved in policy development to foster changes in attitudes and behaviour that would in turn promote the human rights of women and girls. He urged that the ICPD agenda be wrapped into national development strategies, especially in health policies, strategies, programmes and budgets.

That work was very important since more than half a million women died from causes related to pregnancy and childbirth each year and very little progress had been made in that area over the past 15 years. According to the United Nations, 13 per cent of maternal deaths were due to unsafe abortion, and in parts of sub-Saharan Africa, the figure was 30 to 40 per cent.

Fore her part, Mara Brawer, Under-Secretary for Equality and Quality of Education of Argentina said reproductive rights and access to reproductive healthcare were a major priority for her country. A sexual and health law, passed in 2002, aimed to provide universal access to reproductive health services. The number of live births assisted by doctors had increased 99 per cent in 2007, while the maternal mortality rate had dropped by 15 per cent, compared to 1999 levels. In addition, Argentina had exceeded the 2015 goal of 75 per cent condom use -- it

boasted 85 per cent use. In March, Argentina had passed a law to prevent violence against women in inter-personal relationships. She said fulfilling the Millennium Goals would be possible if all States understood they were to be achieved in a context of international development policy.

Also speaking today was the Deputy Prime Minister of Tajikistan.

The Minister for Foreign Affairs of Benin and the Minister of State for External Affairs of India also spoke.

The Deputy Ministers for Foreign Affairs of Egypt and Austria also addressed the Assembly, as did senior Ministers of El Salvador, Lebanon and Mongolia also spoke, as did the Secretary of Health and Social Affairs of the Federated States of Micronesia.

Also addressing the Assembly was the Under-Secretary of State of Finland.

The Secretary-General of the Higher Population Council of Jordan spoke, as did the Secretary-General of the National Population Council of Mexico (on behalf of the Rio Group).

Also speaking were the representatives of Sudan (on behalf of the "Group of 77" developing countries and China), Philippines, Sri Lanka, Israel, Poland, New Zealand, United States, Nepal, Switzerland, Kazakhstan, Cuba, China, Iran and Russian Federation.

The General Assembly will resume at 10 a.m. Tuesday, 13 October to continue and conclude its commemoration of the fifteenth anniversary of the International Conference on Population and Development.

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Background

The General Assembly met this morning to commemorate the fifteenth anniversary of the 1994 International Conference on Population and Development (ICPD), held in Cairo, Egypt. The Conference's Programme of Action laid out a new strategy, which emphasized the links between population and development, and which focused on meeting the needs of individual women and men, rather than achieving demographic targets.

A primary goal of the strategy is to make family planning universally available by 2015. It also includes education goals, especially for women and girls, as well as goals to reduce levels of infant, child and maternal mortality. Among other issues addressed are those relating to population, the environment and consumption patterns; the family; internal and international migration; HIV/AIDS prevention and control; technology, research and development; and partnership with the non-governmental sector.

Opening Remarks

ALI ABDUSSALAM TREKI, <u>President of the General Assembly</u>, said the ICPD was a development meeting that had addressed a wide range of important issues that contributed to the work of the landmark Millennium Summit and the elaboration of the Millennium Development Goals. The United Nations continued to be guided by those efforts, he added.

Since the inception of the United Nations Population Fund (UNFPA) some 40 years ago, the ambitions and concerns of every community had been connected to its population. The population factor had been integrated into national development strategies. Countries had begun to undertake a common strategy to ensure that growth benefited all. The issues raised 15 years ago at Cairo continued to guide the international community to help address problems that affected the survival of women, safe maternal care, the protection of reproduction rights and the overall empowerment of women. The options available to women were much wider now, he said, paying tribute to UNFPA and its work. The primary goal was to integrate population growth into a country's development strategies.

BAN KI-MOON, <u>United Nations Secretary-General</u>, said the 1994 Cairo Conference marked a major shift in the international mindset on population issues. Countries from around the world had affirmed that population was not about numbers, but about people and that women's health, education, employment and empowerment were the keys to a sustainable future. The Cairo Conference grappled with some of the most sensitive issues of its day and achieved a consensus.

"The Conference was a shining example of what the United Nations does like no other Organization in the world: be a pioneer in addressing global challenges and bringing Governments together to set international goals that go further than many countries would on their own," he said.

It was fifteen years ago in Cairo that for the first time, Governments had acknowledged that every person had the right to sexual and reproductive health, Secretary-General Ban continued. The international community was meeting today to note the progress that had been achieved, acknowledge the main problems that remained, and strengthen their resolve to overcome them.

He said that 15 years ago, 71 out of every 1,000 babies died during their first year of life and today that number had been reduced to 51 per 1,000. Also at that time, fewer than half of all women that gave birth in developing countries had skilled health personnel to help them. Now more than 60 per cent received this life-saving assistance. The international community had worked hard for this progress and he paid tribute to the UNFPA for its tireless advocacy and invaluable activities. But for far too many people, the consensus in Cairo remained more a goal than a reality.

The ICPD Programme of Action was critical to achieving the Millennium Development Goals and especially important for goal number five: to cut maternal mortality and achieve universal access to reproductive health care. He said that fully carrying out the out the action plan meant providing women with reproductive health services, including family planning. It meant backing poverty-eradication initiatives and it meant preventing rape during wartime and ending the culture of impunity. He was personally committed to doing everything possible to empower women in the world and around the world and called on all development partners to join him in recommitting to the Cairo Programme of Action until all its promises were fulfilled.

THORAYA AHMED OBAID, Executive Director of the <u>United Nations Population</u> <u>Fund</u>, said that at Cairo, 179 Governments had ignited a spark of change 15 years ago that continued to improve the lives of people. The Programme of Action had placed people at the centre of development and called for the collection and analysis of population data to guide equitable policy decisions. It had positioned reproductive health, including family planning, and the health relationships and well being of individuals as a right. It had made clear that when women were empowered and supported to determine the number and spacing of their children. It had also made clear that women improved their own lives and the well-being of their families, communities and countries.

She said the right to sexual and reproductive health and women's empowerment was at the core of the link between population and development. Reproductive choices were central to gender equality and could influence population dynamics. The international community had learned a great deal in carrying the Cairo consensus forward over the past 15 years, particularly five lessons that pointed the way ahead.

She said that the first lesson showed that aspirations at the Cairo consensus were taking root at the local level. Countries and communities were engaged in conversations and programmes that addressed culturally-loaded issues, such as child marriage, girls' education, HIV/AIDS prevention, female genital mutilation, and violence against women. Communities all over the world were progressively invoking the values and beliefs that protected the rights of women and young people as they brought about change from within, she said.

A second lesson was that investment was critical, she continued. The good news was that the momentum for maternal health was building and there was growing commitment at the highest levels. That commitment had to be matched with increased funding for a comprehensive package of maternal and reproductive health services to achieve the Millennium Development Goals.

Today's demographic challenges were unprecedented and demanded coherent policy responses. The third lesson derived from the ICPD was that population

data, if properly analyzed and used, provided a solid foundation for developing responsive policies and programmes and monitoring accountability. The 2010 round of censuses would provide much needed data, surveys and rapid assessments to guide the international community to targeted responses for the most vulnerable. The third lesson was that working in silos did not produce maximum benefits as people's lives, needs and rights were intertwined. Development partners were increasingly working together across sectors to build national capacities. United Nations reform for development effectiveness was critical to achieve better results on the ground.

The last point was that the knowledge that hard-won development gains could easily be reversed, she said. Urgent and concerted action was needed to protect the most vulnerable. The challenge was to summon the courage and wisdom to respond to the crises -- food, energy, financial and climate change -- and to shape development that was socially equitable and environmentally sound. As the international community looked forward to 2015, it needed to accelerate implementation of the ICPD Programme of Action and reaffirm its commitment. The staff at UNFPA would continue to help Member States implement their national programmes as envisioned in the Programme of Action.

Statements

KURBANOVA RUKIA, Deputy Prime Minister of <u>Tajikistan</u>, said her country had set up an office to enshrine universal values that would recognize the equality and rights of men and women. Indicators since 1994 had shown that Tajikistan had overcome political instability and that its economy had grown. However, overcoming poverty remained a concern. Those figures stood at some 82 per cent in 2003 and then had fallen to 53.5 per cent in 2007. That drop was due to peace, migration and macro-economic stability. Thus, Tajikistan had made significant strides towards poverty reduction.

Nevertheless to eradicate poverty, real income had to go up and people's quality of life had to improve. With that in mind, she said Tajikistan had thus adopted a poverty-reduction strategy paper, which included giving the poor access to healthcare and education. Continuing, she said birth rates, which had dropped in recent years, had nonetheless balanced out a decline in population figures due to mass migration. Large families were more materially disadvantaged and more likely to remain in poverty. They were also susceptible to multiple health problems. In 2008, maternal mortality rates were 43 out of 100 000 live births.

She went on to say that each year, she added, 100 000 people left the country, stressing that mass migration had impacted Tajikistan. Some of the main reasons behind such an exodus included people were leaving the country to study abroad, and others were looking for work. She stressed that tackling unemployment was central to a Tajikistan's poverty reduction strategy. Since 1994, there had been a 17.5 per cent rise in the population's economic activity. High birth rates had impacted the social and economic situation of families and women's levels of education.

The Government's new approach to reproductive health and human rights had changed population and development, making it possible to analyze the situation in that. She said that in 2004, Tajikistan approved a ten-year strategic plan for reproductive health that had included training, modern contraceptive techniques and sex education. Concluding, she said Tajikistan required, with the support of

the United Nations, and through bilateral and multilateral efforts, modern solutions to improve the population's situation. In the meantime, all of her country's efforts were aimed at implementing the Programme of Action, she said.

VITA A. SKILLING, Secretary of Health and Social Affairs of <u>Federated States of Micronesia</u>, speaking on behalf of the Pacific Islands Forum, reiterated her delegation's unequivocal support for the Programme of Action and the Assembly's 1999 twenty-first special session, among other outcomes of ICPD. She also reiterated her support for various commitments, including the 2009 Cairns Compact on Strengthening Development Coordination in the Pacific and the revised 2004 Pacific Platform for Action on the Advancement of Women and Gender Equity.

She said that preventable maternal mortality and morbidity was the greatest health inequity, and while Pacific States worked to address that issue, some still experienced unavoidable deaths, as women lacked timely access to relevant services, including family planning. She urged special attention to ensure access to emergency obstetric care, and voluntary family planning services, regardless of socioeconomic or educational status.

Continuing, she said, given the high rates of unplanned teenage pregnancies, sexually-transmitted infections and HIV/AIDS incidence was expanding, which made universal access to reproductive health information and services ever more urgent. Also, there was a need for sustained national action to ensure youth involvement in policy making and programming. Progress towards gender equity and women's empowerment had been slow in Pacific Island countries, and other challenges included endemic violence against women and girls. With that, she called for increased and sustained national action to eradicate gender-based violence. On climate change, she said efforts to address that phenomenon should be built into national development strategies of vulnerable countries. Also, she requested urgent international action to help low-lying Pacific Islands address population displacement and impacts on human welfare.

VANDA GUIOMAR PIGNATO, First Lady and Minister of Social Inclusion of <u>El Salvador</u>, said that since 1994, it had become ever more obvious that population, poverty, patterns of production and consumption and the environment were inextricably linked and that none of them could be addressed separately. The concept of development was not a mere economic issue but rather it also embodied social factors. Population matters could no longer be seen in terms of statistics and abstractions; such matters must be included in all efforts to address development issues, including ensuring equality between men and women, she added.

On the link between people and their environment, diversity was a primary cultural factor in terms of how people, nations and continents related to one another. Moreover, migration, which was promoted by globalization, had a decisive emphasis on development. She said that a lucid global approach to all of those and other topics had had a huge impact, so much so, that recommendations and agreements made at Cairo now formed the bulk of public policy within many States.

Nonetheless, she stressed that in the last 15 years, the tangible outcomes of the Programme of Action had moved a lot more slowly than levels of awareness among today's youth. Today's commemoration was thus timely, in terms of urging Member States to press on towards pending goals and to remind international organizations and donor countries to wake up, to go beyond the 2020 target and to aspire for realistic achievements. Furthermore, all stakeholders must join forces

so that their conscious will power could be translated into action, which could help promote the comprehensive respect for human rights.

On population matters, she went on to point out that much remained to be done before the human rights of the world's rapidly-aging population were met, especially since the means to implement assistance policies were lacking. Nonetheless, her region had taken an initial step forward with the adoption of the Brazil Declaration on the Rights of Elderly People. On a global scale, El Salvador had undertaken efforts to promote the Madrid International Plan of Action on Aging. She took this opportunity to call for a United Nations-led approach to take the necessary steps to ensure the protection, promotion and full recognition of the elderly.

MARIO AOUN, Minister of Social Affairs of Lebanon, said the Assembly was meeting at a time of crises, the most serious of which was an increase -- to unprecedented levels -- in the number of people living in extreme poverty, which worsened disparities. Along with that, problems in the areas of health and the environment could worsen the population situation by undermining efforts to achieve social development objectives. As such, he urged promoting international cooperation to create an environment conducive to progress, saying that a review of demographic issues was more important than ever amid the global economic crisis. Goals had to be reconsidered to ensure they met international and regional needs.

While the international community continued to work towards objectives, certain countries continued to endanger the stability of societies through their actions, which hampered the implementation of social-development objectives and could sow the seeds of social revolution, he continued. For its part, Lebanon, despite the war launched by Israel in 2006 and various threats looming over the country, had striven to implement the objectives of the ICPD. Progress in human development had led to the settlement of certain health issues for some population sectors.

Also, he said, there had been tangible improvements in reproductive health and in school attendance for high school and post-secondary education. To reduce the gender gap, Lebanon had endeavoured to improve women's economic and political participation. In poverty reduction, the Government was working to remedy the causes of poverty, and was taking care of extremely poor families through an action plan. However, priorities must be considered in light of international emergencies, and he called for expanding the participation of Governments, as well as international and regional organizations, to achieve objectives.

GANDI TUGSJARGAL, Minister for Social Welfare and Labour of Mongolia, said it was gratifying that 15 years after the landmark Cairo Conference, the agenda set out there had not remained a promise, but had been translated into concrete initiatives, policies, laws and programmes at international and national levels, which were having substantial impacts on the well-being of millions of people worldwide. It was also noteworthy that many developing countries had made major progress towards attaining objectives in the ICPD Programme of Action.

In spite of such progress however, major gaps remained in the Programme's implementation. Also, various new and emerging challenges had caused setbacks in achieving the set goals and objectives, she said, pointing to current food, fuel and financial crises, global warning and armed conflicts in some regions that had

adversely affected the well-being of people in one way or another. With that in mind, she looked forward to the identification of the right strategies to address those challenges and gaps during the course of the global review exercise.

Noting that national efforts and actions were instrumental for the implementation of the ICPD agenda, she stated that Mongolia had made substantial progress to that end, reflecting the Cairo principles in key policy documents, including those on national population development, health, reproductive health and national gender equality. She also pointed out that as a developing country, Mongolia had been seriously affected by the current global economic and financial crisis and was currently coping with its negative consequences. That was a real threat to the full implementation of ICPD agenda and Millennium Development Goals.

As no country in the world could overcome that crisis on its own -- even if they invested all their efforts to that end -- close cooperation at regional and sub-regional levels, as well as among neighbouring countries, was crucial for recovery within the shortest possible period, she stated. The complex challenges, both existing and emerging, in the area of population and development should be addressed with new and creative approaches both at international and national levels, she urged.

JEAN-MARIE EHOUZOU, Minister for Foreign Affairs of Benin, said efforts since 1994 had made everyone aware that poverty, problems linked to production and consumption and environmental threats, were all closely linked. Indeed, there was "a new degree of understanding" about the promotion of development. The Cairo action plan spelled out specific objectives, the most important of which was in the integration of population concerns into decision-making processes at all levels, in all regions. The overall goal was to improve the quality of life for present and future generations. After 15 years, countries had implemented various economic, ecological, political and other goals. There had been a drop in mortality rates, a rise in education levels and improvements in the economic and legal status of women.

In Benin, he said bold initiatives had been undertaken to implement the Programme of Action, as showed by a 1996 declaration on population policy. Since April 2006, the Government had undertaken various measures, including: social demographic questionnaires; plans to integrate population questions into development efforts; improvements in the legal status of women; development of micro-finance as a powerful tool for women's empowerment; adoption of regulations at the economic, legislative and institutional levels to strengthen families and advance equality within families; and strengthened actions in employment.

To fight against HIV/AIDS, there had been a significant reduction in the rate of prevalence. Thanking the UNFPA for its support, he said more support was needed and he hoped to receive assistance from all development partners to achieve the Conference's goals. In particular, Benin needed better access to health and reproductive services, capacity strengthening, more care of street children and better integration of environmental concerns into all sectors of life. The financial crisis had compounded the food and ecological crises, and was particularly impacting least developed countries, like Benin. In Africa, poverty was on the rise and he urged developed countries to support least developed countries in fighting poverty. Progress today should help achieve the Millennium Development Goals in 2015.

SUGIRI SYARIEF, Minister of National Family Planning Coordinating Board of Indonesia, said that, as the world's fourth most populous nation, Indonesia attached great importance to population and development issues. Indeed, the ICPD Plan of Action was integral to Indonesia's long- and medium-term development plans, whose overall goal was to enhance population quality and manage growth. Since the Cairo Conference, Indonesia had sharply reduced the number of people surviving on less than \$1 a day, thus achieving one of the Millennium Development Goals.

Further, he said that improving school enrolment rates, especially for women and girls, was part of the national poverty reduction strategy, while work also was being done to protect the rights of working women; to narrow the gender gap in education; reduce high maternal mortality rates; halt domestic violence and prevent trafficking of women and girls. Continuing, he said some 9,800 women died each year due to pregnancy and delivery complications and, in response, Indonesia was implementing a maternal health programme that focused on improving costeffective access to maternal health services.

In the area of family planning, his Government was revitalizing its programme and growing numbers of women and couples could now choose the number and spacing of their children. Also, rapid population growth was beginning to slow and infant mortality was declining in most provinces. The Government's programme for adolescents provided teenage girls and boys with reproductive health information and counselling on gender equality, among other issues. However, he said, HIV/AIDS had hindered efforts to achieve reproductive health goals and Indonesia was exploring various ways to combat the disease. More had to be done, and Indonesia welcomed international support in reaching population-related goals. In closing, he said implementation efforts at all levels must not weaken; human and financial resources must be mobilized to implement the Programme of Action and national institutional capacities must be strengthened through partnership.

SHASHI THAROOR, Minister of State for External Affairs of <u>India</u>, calling the International Conference a "landmark" event, said it had overcome deep divisions to forge an unprecedented global consensus on development and human rights issues, creating a blueprint for 20 years of action. For the first time, population and development issues had been dealt with in a holistic manner, with individuals placed at the heart of the development process. There was a substantive effort to emphasize the centrality of reproductive health and acknowledge women's central role in the development process. In India, that shifted how the Government addressed population stabilization, from a target-based approach to one based on making informed and voluntary choices.

Indeed, today's efforts offered an opportunity to review progress and analyze challenges, adding that studying the issues would show that global achievements had been mixed at best. There had been "slippages", including in India, and he regretted that the world was still far from realizing the goal of universal primary education, and that infant, child and maternal mortality rates were still high. Nevertheless, "these goals are still achievable," he said, explaining that resolute political will was needed.

Despite the global economic slowdown, India had placed high priority on the education and health sectors, he said, adding that it had enhanced, by 19 per cent, social-sector allocations during the current financial year. India's family planning programme was based on voluntary, informed choice, and aimed to achieve

population stabilization by addressing unmet needs. Under the "eleventh plan", children were at the centre of an integrated approach to enhance child survival, growth and development, while, under an "education for all" campaign launched in 2000, national intervention to achieve universal primary education was a focus.

India also had empowered women in the area of governance and decision-making, and today, had the largest number of female representatives in local government in the world. Finally, he said India's infant mortality rate was 55 per 1000 live births, while the maternal morality ratio had dropped, from 301 in the 2001-2003 period to 254 in the 2004-2006 period. Amid today's difficult economic climate, India was firmly committed to realizing the vision set out in Cairo 15 years ago.

JOAKIM STYMNE State Secretary, International Development Cooperation of Sweden, speaking on behalf of the European Union, highlighted positive developments since ICPD. Those developments included, among others, making universal access to reproductive health part of the Millennium Development Goals. They had also included taking actions that had led to declines in infant and child mortality, increases in girls' enrolment in school, and positive responses to HIV/AIDS. Governments now recognized the importance of population data and analysis as a basis for development strategies, policies and programmes.

Despite progress, there were many challenges, he said. The effects of the global financial crisis were still being felt; poverty, hunger, lack of safe drinking water, and over 2.5 million people lacked access to basic sanitation. Climate change and its weather-related disasters, drought, and rising sea-levels, were affecting living conditions, including migration. Social infrastructure was on the decline and families were being plunged back into poverty. Women, youth, the vulnerable and marginalized were most affected. Girls were the first to be pulled out of school.

Women demanded change, but their political participation and access to decision-making processes were still restricted. Oftentimes, women still faced discrimination in law and in practice. "Progress in this regard has been too slow," he said. Compounding the problem was violence against women and girls, including sexual violence, which was a major obstacle to the achievement of equality, development, peace, and security. Thus, he urged that efforts be stepped up to implement Security Council resolutions 1325 (2000) and 1820 (2008).

Continuing, he said the ICPD Programme of Action and the Beijing Platform for Action paved the way for a progressive and forward-looking approach to gender equality. However, men and boys had to become fully involved in policy development, so as to foster changes in attitudes and behaviour to promote the human rights of women and girls. He urged that the ICPD agenda be put into national development strategies, especially in health policies, strategies, programmes and budgets.

That was very important because every year, more than half a million women died from causes related to pregnancy and childbirth. Indeed, very little progress had been made in that area over the past fifteen years. According to the United Nations, 13 per cent of maternal deaths are due to the unsafe abortion, and in parts of sub-Saharan Africa, the figure was 30 to 40 per cent. Lastly, he noted that HIV/AIDS continued to pose a threat to development and said the answer was in integrating sexual and reproductive health and rights into policies and

programmes. He added that achieving the goals of the ICPD Programme of Action, civil society needed to be involved. Equally important was political will.

HAJA AFSATU OLAYINKA E. KABBA, Minister of Fisheries and Marine Resources of Sierra Leone, recalled that the ICPD Programme of Action recognized the rights to development, education, health, women's empowerment and gender equality as decisive factors towards poverty reduction. Today, it was recognized that the Cairo Conference had been remarkable in many ways, notably as it had garnered consensus on complex development issues and provided a clear understanding of the relationship between population and development.

Sierra Leone had followed developments regarding the Cairo action plan, she said. As a post-conflict and poverty-stricken country, characterized by high infant and maternal morality rates, Sierra Leone agreed that the ideas of 1994 were as valid and relevant today. Despite the current difficult economic situation, Sierra Leone remained unflinching in its support for the UNFPA. Universal access to reproductive health was needed to reduce poverty, as it increased prospects for higher investment in human development and food security.

As for Sierra Leone's efforts since 1994, she highlighted that the national family planning programme, reproductive health strategy and reproductive health policy all had been established. Moreover, a Reproductive Health Commodity Security system had been put in place to distribute drugs and a directorate created to make its strategy operational. Various health facilities had been upgraded to strengthen emergency obstetric care, while doctors and nurses had been trained by the UNFPA in specialized areas.

Also, community ambulances were now used to transport pregnant women from hard-to-reach areas to hospitals, with proceeds saved from such efforts directed towards delivery services. She said that infant mortality rates had significantly dropped and maternal mortality rates had fallen by one-third in the last three years. Blood banks had been established in each region of the country. Finally, new targets for reproductive health included providing more resources and undertaking more capacity-building activities, such as providing training and logistical support.

NAELA GABR, Deputy Minister for Foreign Affairs of Egypt, said her country was keen to host the first conference to show the priority it attached to population issues and their relation to the international development agenda. The 1994 conference marked a historical turning point in reaffirming the direct link between population issues and development. It was imperative to use today's commemoration -- five years before the date for the achievement of the Cairo Conference Goals and six years for the achievement of the Millennium Development Goals -- to consider the best means to face the challenges.

Egypt believed that real progress depended on the mobilization of the necessary political will to face today's crises and bridge the implementation gap in the outcomes of major United Nations conferences in the economic and social areas. The negative impact of the international economic, energy, and food crises were additional reasons to reaffirm the developed countries' commitment to help developing countries reach the ICPD action plan's goals. Egypt believed that those goals supported the greater framework of its national and regional development plans, as well as strategies in the Arab and African context, and

aimed to strengthen its regional capacity towards implementing the results of major United Nations conferences.

On the national front, she said Egypt had created a new ministry in 2009 to deal with family and population issues. Numerous policies and legislation had aimed to deepen the country's commitment to women empowerment, achieve gender equality, improve human rights situations, and reduce maternal and child mortality rates. Egypt also decided to host the regional office of the UNFPA in Cairo. In addition, she expressed her Government's continued concern for the suffering of the Palestinian people under occupation and the negative implications that situation had on the achievement of internationally agreed development goals, particularly those of the ICPD Programme of Action, she said.

JOHANNES KYRLE, Deputy Minister for Foreign Affairs of <u>Austria</u>, said the fifteenth anniversary of ICPD was a reminder that five years remained to implement the commitments made at Cairo. He noted that the 20-year ICPD Programme of Action, also known as the "Cairo Consensus," adopted by the conference was a crucial milestone that placed the individual and women-related issues at the heart of population and development. Unlike the Millennium Development Goals, for which the Programme had laid foundations, it addressed among other things, the complex links between population, economic growth and sustainable development.

Noting that the past 15 years had witnessed constant and promising progress in implementing the Cairo Consensus through Government, civil society and the United Nations, he thanked the UNFPA for its contribution to women's reproductive healthcare in particular, and to the Consensus and the Millennium Goals in general. Despite such strides, he cautioned that urgent and stronger action must be taken to reduce poverty and inequality, and to ensure women's empowerment, especially through keeping girls in school. He regretted that it was unlikely that that the 2015 goal for reproductive healthcare would be reached. In that regard, he encouraged the UNFPA to step up efforts to improve maternal health, partly because 3 million infants died within the first week of birth.

He went onto express concern that the feminization of HIV/AIDS was on the rise, and called for stepping up efforts to ensure women and girls' access to sexual and reproductive health and rights information and services, in order to reverse that trend. He added that gender-based violence was one of the reasons for that alarming rise and called such violence a destructive threat to women's health and security. In that regard, Austria was proud to host the Eighteenth International HIV/AIDS Conference in July 2010 in Vienna in partnership with the Joint United Nations Programme on HIV/AIDS (UNAIDS), and he hoped that conference would evaluate progress and contribute to the global fight against that disease.

He commended UNFPA's contribution to ending all forms of violence against women, including harmful traditional practices. As a show of support, Austria contributed funds to the Task Force on Violence against Women and to the United Nations Campaign to eradicate Female Genital Mutilation until 2015, he said. He urged Member States to recommit to the Consensus, adding that this was a timely moment to do so, by assessing progress and pinpointing pending challenges. As only five years remained to implement the Consensus, Member States must speed up action to ensure universal action to reproductive health and to support UNFPA-led efforts to ensure a holistic approach to sexual and reproductive health and rights.

MARA BRAWER, Under-Secretary for Equality and Quality of Education of Argentina, said today marked an important opportunity to assess progress and renew commitments made in Cairo with a view to fulfilling the Millennium Development Goals. Argentina firmly supported the ICPD Programme of Action, which reflected the close links between poverty, health, education, consumption and production models and the environment. While significant progress had been made in poverty reduction, hunger eradication and education, the global economic crisis had "put the breaks on it," and it was now unlikely that States would achieve the Millennium Goals.

For Argentina, growth in recent years enabled it to increase resources for social policy, and today, the Government promoted inclusion and social progress by creating equal access to housing and decent work. Indeed, economic growth must be accompanied by the political will to create quality employment, she continued, adding that poverty eradication efforts could be sustained with the creation of decent work. Making employment a focus would also help achieve other Millennium Goals. In addition, education was a national priority — it was a public good, fundamental right and joint responsibility. Argentina had established universal basic education and aimed to achieve universal secondary education.

She went on to say that health was a major determinant of economic growth, and health-related problems transcended national and jurisdictional borders. It was crucial to ensure comprehensive coverage in the provision of essential health services. Sex education was understood from a perspective of promoting health — it helped reinforce gender equality and reject discrimination. Reproductive rights and access to reproductive healthcare was a major priority. A sexual and health law, passed in 2002, aimed to provide universal access to reproductive health services. Citing statistics, she said that in 2007, the number of live births assisted by doctors had increased 99 per cent, while the maternal mortality rate had dropped by 15 per cent versus 1999 levels. In addition, Argentina had exceeded the 2015 goal of 75 per cent condom use — it boasted 85 per cent use.

Further, she discussed institutional mechanisms to achieve gender mainstreaming, notably a quota law, which increased the number of women in elected posts. In March, Argentina had passed a law to prevent violence against women in inter-personal relationships. In closing, she said fulfilling the Millennium Goals would be possible if all States understood they were to be achieved in a context of international development policy. In that context, she stressed Argentina's support for the Cairo action plan.

RITVA KOUKKU-RONDE, Under-Secretary of State of <u>Finland</u>, said it was clearer now than ever before that population issues were closely linked to poverty and sustainable development. Poverty could be overcome only if development was ecologically, economically and socially sustainable.

Highlighting the links between population growth, climate change and food security, she also pointed out that since no country could tackle those problems alone, it was the shared responsibility of Member States to ensure the planet's survival for future generations. The links between climate and population had basically two dimensions. On one hand, the impacts of climate change were already apparent, from droughts and floods to destabilized livelihoods, and they were being felt by those who were already impoverished. Yet, on the other hand, uncontrolled population growth would further increase those effects.

Continuing, she noted that most environmental problems, including those that arose from climate change, tended to be exacerbated by population size and growth. Hence, the fact that the world's population had reached almost 7 billion and continued to grow by some 78 million each year was unquestionably relevant. The fastest population growth was taking place in the poorest nations of the world, many of which were already facing having difficulties meeting current food needs. Responding to food security in the medium and long term meant that trade and aid policies must be integrated and agricultural production needed to be increased.

Further, she said sustainable development called for a comprehensive approach where the social, economic and environmental dimensions of national policies and global governance were developed side-by-side. That needed to happen at both the global and local levels. Also, there was need to adopt an integrated long-term approach to population issues; one that took into consideration both global and individual aspects. Success would then be mirrored at the global level as sustainable population growth. She reaffirmed Finland's, and urged others to similarly commit to the targets set in Cairo 15 years ago by keeping "priorities straight".

RAEDA AL-QUTOB, Secretary-General of the Higher Population Council of <u>Jordan</u>, reiterated her country's commitment to the Cairo action plan and the framework of the Millennium Development Goals, as they formed a holistic package of objectives to collectively raise the quality of life for all population sectors. They would help alleviate poverty, increase the "uptake" of education, reduce social inequity and raise the standard of health services for children and women, among other things.

In Jordan, while the total fertility rate had declined in the past two decades, such positive response to national strategies had been followed by a slowdown -- and subsequent plateau -- of progress. On the positive side, the infant mortality rate had dropped, from 34 per 1000 in 1990 to 19 per 1000 by 2007. Also, the maternal mortality ratio resulting from pregnancy complications, delivery and the postpartum period had also dropped, as reproductive health services had improved. That had boosted Jordan's potential of realizing the Millennium Goal for maternal mortality by 75 per cent in 2015.

Further, she said the Ministry of Health, the Royal Medical Services, the private sector and community health centres had implemented reproductive health programmes. The Health Ministry had also set aside a special budget line for family planning and was distributing contraceptives free of charge. The Ministries of Education, Higher Education, and Scientific Research had, over the past two decades, incorporated the concepts of population and reproductive health into the curriculum of schools at the primary and secondary levels, as well as within the core courses of university study at all public and private universities.

To that end, she said that access and enrolment in primary education had now reached near record levels and plans were under way to reduce school dropout rates, increase private sector funding and involvement, raise the standards of education, and reduce the educational gap between male and female students. Noting the enormous headway Jordan had made in the empowerment of women in health education, she said the Government had put in place strategies and programmes to prevent, treat, and create awareness of the HIV/AIDS virus. It was noteworthy

that Jordan had one of the lowest incidents rates of the disease in the Middle East region.

OSCAR LAPUENTE (<u>Guatemala</u>) said that fifteen years on, many challenges remained to ensuring full implementation of the ICPD action plan and Member States therefore must come up with a new development model. The world had been advancing at a tremendous speed, showing that human ingenuity could create positive processes for the lives of populations. Technological advances and free market economies went so far that nations had lost the true sense of globalization, which was, he stressed, sustainable human development.

He said the world was still gripped by the effects of the global financial crisis, the impacts of which ranged from job losses to other consequences that affected people's quality of life. Despite the crisis, Guatemala was still within its growth guidelines, which stood at an annual average of 4 to 5 per cent. He stressed that the Government was trying to include citizens through structural services like health, public services and education. It was also creating institutional conditions to keep adult and child mortality rates down. Child mortality had dropped from 34.8 per cent for every 1000 births in 1996 to roughly 24.5 per cent in 2007. He hoped that by the end of 2009, that would have dropped even further.

Turning to statistics, he said that in recent years, his country had made significant strides in providing better quality social, demographic and economic data. The population, housing and agricultural census of 2002-2003 was one such example. He was convinced that results obtained so far could only be sustained if they were consolidated through long-term public policies.

He urged the world in general and his country's political and economic institutions in particular not to abandon their efforts for social protection, urging them to assume a more intensified sense of responsibility and to institutionalize efforts to address the concerns of vulnerable groups. In conclusion, he said that development had ethical and moral indicators, which brought changes and could only be reflected through the improved lives of citizens.

ABDALMAHMOOD ABDALHALEEM MOHAMAD (<u>Sudan</u>), speaking on behalf of the "Group of 77" developing countries and China, said his delegation strongly believed that the principles, goals and objectives set out in the ICPD Programme of Action, as well as in the other outcomes of the major United Nations conferences and summits, provided a comprehensive framework for international development. The implementation of the ICPD action plan was crucial for the eradication of extreme poverty as well as the achievement of the other Millennium Development Goals.

He said the Group believed that population issues had to be addressed in a comprehensive manner as outlined in the ICPD Programme of Action. With only five years remaining until the end of the ICPD Programme of Action, and being past the mid-point of the Millennium Development Goals, it was urgent that Member States recognized gaps and challenges, to consolidate lessons learned, and to reaffirm their commitments, redoubling their efforts, sustaining the achievements and increasing resources to accelerate progress towards the fulfilment of the Cairo action plan as well as the Millennium targets.

He said Cairo had squarely addressed the complex goals' links between population, economic growth, urbanization, migration and environmental concerns such as climate change. Current worldwide crises, including the current economic downturn were seriously affecting aid flows and hindering efforts to launch critical programmes in areas such as infrastructure refurbishment, health care and education, all sectors that were necessary for sustainable development and implementation of the ICPD action plan.

The Group of 77 and China was also concerned that the resources directed towards the implementation of the ICPD action plan had been consistently below target. To address that issue, he appealed to donors, United Nations organizations and other international organizations to enhance their financial and technical support to developing countries, including in the field of capacity-building.

FÉLIX VÉLEZ, Secretary-General of the National Population Council of Mexico, speaking on behalf of the Rio Group, discussed a 7-8 October conference organized by the Latin American and Caribbean Centre of Democracy in Santiago, Chile, which brought together officials from Governments, Parliaments, civil society and academia to assess regional progress towards achieving the Cairo Programme of Action. In the last five years, Latin America had made significant advances in improving conditions for its populations, during which time the region had also experienced its most important cycle of economic expansion since 1970.

Despite that, he said, there were still 180 million poor and more than 70 million people living in extreme poverty in the region. Among the most difficult lessons from the global economic crisis was that social losses were regained very slowly in subsequent growth cycles. In the five years left to achieve the ICPD action plan, most Latin American countries faced difficulties, despite that many had made important gains in population and development. As such, he urged Governments, civil society organizations and others to reach both the Cairo targets and the Millennium Development Goals.

Indeed, the Goals would not be met without attaining universal access to reproductive health. Also, he said it was imperative to define a five-year strategy that included coordination mechanisms. Strong partnerships between Governments, parliaments, civil society organizations and others would allow the region to make progress, prioritising key challenges and applying lessons learned through South-South cooperation. In that context, he urged reaffirming the Cairo agenda and thinking about an agenda for global, national, regional, and sub-regional levels for the coming decades.

He said the Technical Secretariat of the Committee of Population and Development, a body within the Economic Commission for Latin America and the Caribbean (ECLAC), should present a proposed agenda at the Committee's next meeting. Among its emerging themes, it should include: the aging process; the existence of societies with complex gender and inter-generational relationships; the food crisis; the "new epidemic" of HIV/AIDS; and climate change. New targets had to be defined and new measures put into practice.

MIA VENTURA (<u>Philippines</u>) said that the downward trend in the incidence of poverty and malnutrition among children under five would allow her country to accelerate its development. Government advocacy of population management as an avenue for poverty alleviation was an important contributing factor to that trend.

Funds had been allocated from the national budget to ensure universal access to reproductive health and family planning. Local governments had also enacted measures towards that end, but the high unmet need of couples for family planning still needed to be addressed more comprehensively. Further, policy reforms aimed to reduce maternal deaths from 162 to 52 for every 100,000 live births.

There had been considerable improvement in the status of women, she said, noting a law signed in August 2009 to ensure women's equitable participation and representation in Government, political parties, international bodies, civil service and the private sector. Among measures taken to address all aspects of human development were efforts to arrest declining enrolment in education and the adoption of a health reform agenda, which included: more, better and sustained financing; regulation to ensure equality and affordability; ensured access to and availability of service; and improved governance. Life expectancy in the Philippines had improved as had mortality rates for infants and children under five, she added.

She closed by recalling that last year, Philippines had hosted the Second Global Forum on Migration and Development, which had renewed the commitment of participants and stakeholders to ensure the protection, welfare and human dignity of migrant workers. The report of that Forum had been circulated to all Member and Observer States, and other stakeholders, and had been submitted to the United Nations Secretary-General.

SURESH CHANDRA (<u>Sri Lanka</u>) said there were only five years left to complete the 20-year ICPD Programme of Action. While pleased with the significant achievement that Sri Lanka had made in key areas, he regretted that millions of people around the globe still lived with poverty, hunger, illness and fear. The ICPD had marked a significant shift from the traditional focus of setting demographic targets and managing population numbers, to an approach based on meeting individual and family needs to improve the quality of their lives. Sri Lanka became a co-signatory to the ICPD action plan at its inception and had therefore reaffirmed its commitment to the fundamental rights of men, women and youth to access the information, support services, and opportunities needed to exercise their right to high standards of reproductive health.

The current population figures showed that giving people personal choices about their family size yielded desirable results. He said the annual average population growth in the period 2000-2007 was 0.4 percent in Sri Lanka, making an immense contribution towards achieving the Cairo principles. The foundation laid by the ICPD played a complementary role in accelerating progress towards achieving the Millennium Development Goals by 2015. For example, the country's prevalence rate for modern contraceptive methods had increased from 20 per cent to 70 per cent since 1975 and more than 96 per cent of births were now attended by skilled health practitioners. Yet the child malnutrition rate remained at an alarming 22.8 per cent, which demanded urgent attention, he said.

The Government had given special attention to that area and had launched several grass-roots level empowerment projects, he continued. That commitment had yielded positive results and changed the poverty map in Sri Lanka, particularly in the Eastern Province, which had suffered from the scourge of brutal terrorism for more than three decades. Under the "Eastern Reawakening" programme, the region was experiencing rapid development, he said.

DANIEL CARMON (<u>Israel</u>) said his country attached great importance to the issue being discussed, and as such had, among other things, integrated gender and the empowerment of women into development and population policies. Indeed, the Israeli Authority for the Advancement of the Status of Women was located within the Prime Minister's Office. That Office promoted policies and programmes to enhance women's status, health, safety and equality, as Israel considered that such initiatives were essential for the overall well-being of society. Israel was also fully supportive of the rights of couples and individuals to decide freely the number and spacing of their children, noting that today, Israel's total fertility was high for a developed country, with an average of three children per woman.

However, that national average resulted from very different family sizes decided on by persons with varied religions and cultural values, he pointed out. Extreme fertility gaps between different population groups -- a leading indicator of socio-economic inequality -- were diminishing as the distribution of, and access to, social and health services and opportunities increased throughout all segments of Israeli society. At the same time, he was proud of his country's achievements regarding the high education attainment of women, their high levels of labour force participation and income.

He said Israel considered the health of its population as crucial public good, and as such, the health system covered every resident in the country. A particularly successful aspect of that system was the Mother and Child Health Clinics programme. Further, as a country that integrated millions of immigrants and refugees, Israel developed comprehensive programmes to assist those vulnerable populations. Since the ICPD Programme of Action was adopted in 1994, Israel had successfully integrated immigrants accounting for nearly one-sixth of its population, he said

In the area of development cooperation, the country's Centre for International Cooperation worked to empower women and improve their health around the world. Israel had also partnered with many United Nations organizations in the global effort to achieve the Millennium Development Goals. Those partnerships had led to various programmes relevant for population goals, including those addressing migration and health, early childhood education, and the prevention of HIV/AIDS in Africa, he added.

pawel Herczynski <u>Poland</u> aligning himself with the European Union, said that by placing the human being at the heart of any activity, the Cairo Conference was a great step forward in the promotion of full respect for human dignity. Stressing that the ICPD Programme of Action had been adopted by 179 countries, and had since been implemented in all continents, he said that fact showed a common understanding for population and development, gender equity and reproductive health issues. In addition, Poland had high hopes for progress in research and development of prevention for HIV/AIDS, notably in the area of microbicides.

He said Poland agreed that the right to attain the highest standards of health was a basis for action, and understood that any reference to sexual and reproductive health did not constitute promotion of abortion. The global economic downturn and the AHIN1 flu pandemic, which crossed borders with lightening speed, proved that common efforts were fundamental to overcoming global crises.

While much had been done over the last fifteen years, many problems still needed urgent collective efforts, and international collaboration was essential to attaining internationally agreed development goals, including the Millennium Development Goals. He said attention should be focused on fighting poverty, enabling universal access to education and, in the area of maternal health, enabling access to health and obstetric care. In closing, he reconfirmed Poland's commitment to effectively implementing the ICPD Programme of Action.

KIRSTY GRAHAM (New Zealand) said the ICPD Programme of Action was significant in addressing some of the most sensitive aspects of sexual and reproductive health, and in promoting a rights-based approach to population issues. Her Government had supported practical initiatives in the Pacific region, including adolescent sexual and reproductive health, increased its core contributions to UNFPA and, through the Human Rights Council, had, in June, co-led an initiative that resulted in the consensus adoption of a resolution on preventable maternal mortality.

At the same time, she was reminded that there were only five years to fulfil commitments made in 1994 and much remained to be done. The consequences of not remaining focused on goals risked long-term population and health problems, including gender inequality, high rates of unintended teenage pregnancy and increasing social and economic disparities. As such, she urged States to promote universal access to reproductive health, reduce maternal deaths and disabilities and support women's economic empowerment programmes.

Specifically, she was aware that sub-Saharan Africa, the Pacific -- and notably Melanesia -- were least likely to meet the Millennium Development Goals. Perhaps most critically, the effects of climate change would directly impact human welfare, food security and sustainable development. "How we address climate change in Copenhagen would signal a renewed effort to achieve the goals of the ICPD", she stressed. Any future climate agreement should include mitigation and adaptation responses that considered population dynamics. Progress in other bodies should include increased access to sexual and reproductive health, and voluntary planning aimed at a rights-based approach to lowering fertility, among other things. In closing, she said New Zealand would continue to focus on sexual and reproductive health, HIV/AIDS and gender equality through continued collaboration with its partners.

WELLINGTON WEB (<u>United States</u>) said his Government strongly supported the goals and ideals of the International Conference, adding that the present administration had renewed its commitment to work with the global community to implement the ICPD Programme of Action. Indeed, Cairo represented a turning point in the world's perspective, as nations had recognized the importance of voluntary decisions made by individuals and couples about the spacing of their children, and about the critical role of population and development objectives in achieving sustainable development, education, gender equity and equality and provision of universal access to reproductive health services.

Fifteen years on, significant progress had been made towards fulfilling the Cairo Programme of Action, including that more births were attended by skilled health personnel, a number that, in East Asia, had risen to 98 per cent in 2006 from 71 per cent in 1990, he continued. More women and couples were planning the size of their families and contraceptive use had increased worldwide, from 47 per cent of women of reproductive age in 1990 to 56 per cent in 2007. Infants and

children were also healthier. Moreover, the United States was pleased at the forty-second session of the Commission on Population and Development, which produced a highly substantive outcome document reaffirming the commitment to the ICPD Programme of Action. The resolution included an "unprecedented" emphasis on human rights and a new commitment on sexual and gender equality education, among others, and he looked forward to implementing those commitments.

At the same time, much work remained to realize the "promise of Cairo", he said, and to fulfil Millennium Goal 5, which called for a two-thirds reduction in maternal mortality by 2015. Every minute of every day, a woman died from conditions related to pregnancy or childbirth. That dire problem was particularly grave in certain regions, where as many as 1 in 10 women died from pregnancy-related causes. Such deaths occurred despite that the means of prevention were cost-effective and well-known, including pre-natal care and nutrition. The United States strongly supported human rights, women's rights and reproductive rights, as well as universal access to reproductive health and family planning.

In 2009, the United States provided family planning assistance to over 50 countries, including 35 to 40 per cent of donor-supplied contraceptives to the developing world, he said. Government programmes had trained over half a million medical professionals and, last May President Barack Obama announced a six-year, \$63 billion Global Health Initiative as an essential part of United States foreign policy. Reproductive health and family planning were essential aspects of those efforts.

KHADKA BAHADUR BASHYAL, Minister of State for Health and Population of Nepal, said implementing the Cairo action plan would contribute to the achievement of the Millennium Development Goals, thus reducing poverty, hunger, HIV/AIDS and promoting gender equality. Although some commitments had been translated into action, much remained to be done, he warned. It therefore was crucial to identify achievements, constraints and lessons learned to speed up implementing the Plan of Action.

He said the Cairo Consensus was more important than ever before, especially as Nepal was facing challenges in terms of delivering population and healthcare services. He said it had also deployed measures to reduce population growth. The health budget had gone up by up to 20 per cent over the past three years. The Government was spreading the scope to healthcare to reach remote, mountain and village populations. Nepal's poverty-reduction strategy, which still addressed poverty reduction focused on empowerment, social inclusion and equality perspectives, had integrated the Cairo Program of Action and the Millennium Goals. Recently, poverty and human development had improved significantly, he noted.

Continuing, he said the maternal mortality ratio was still very high at 281 per 100,000 live births. To solve complications that led to that, a concept of basic and comprehensive services was being implemented. The pace of change in the country's demographic indicators remained slow. The population was largely rural, poor, young and illiterate. He said it was crucial to bolster national capacity to ensure that young people benefited from the development process.

He said that the Government had a long-term Population Perspective Plan (2010-2031) to mainstream the Plan of Action in plans, policies and programmes. He acknowledged the crucial role of the UNFPA in providing reproductive healthcare

services, promoting gender equality and eliminating gender-based violence, among other things. Although the current financial crisis made providing basic reproductive healthcare more challenging, predictable long-term financial plans were crucial to help developing countries attain the Millennium Goals.

PETER MAURER (<u>Switzerland</u>) observed that, in placing the individual and his rights at the centre of population-dynamics analysis, the Cairo Consensus had put a stamp of approval on a paradigm change, thus heralding in an approach based on the dignity and general well-being of the human being. In many respects, the consensus embodied in the Cairo Program of Action remained a "model of clairvoyance", not only in terms of analysis, but also in terms of action.

Outlining what Switzerland considered to be the principal achievements of the ICPD, he said in terms of reproductive rights and reproductive health, the Programme of Action recognized the fundamental right of all couples and individuals to freely and responsibly decide on the number of children they desired, and on the spacing and timing of their children. That recognition of freedom of choice was a fundamental determining factor of reproductive health and indeed represented a historic breakthrough.

Secondly, he said the Programme of Action highlighted the need to ensure universal access to basic health services, to associate collectively in the planning of health-care policy, and to develop safe-motherhood services within the scope of primary health care. Lastly, on gender equality, the action plan had also recognized that the empowerment of women and the improvement of their condition on the political, social, economic, and health-care levels, constituted an essential condition for sustainable development.

Continuing, he said that responding to the unmet needs of family planning would be enough to reduce by one-third the global rate of maternal mortality by avoiding unwanted pregnancies or dangerous abortions. In certain regions of the world, the complications that arose during pregnancy or childbirth still remained the most frequent cause of death among women. Therefore, he called on Member States to guarantee women's access to primary health-care services, with the possibility of obtaining emergency obstetrical care if needed.

Finally, he said that despite a certain apparent success, the disparities between the sexes persisted in a glaring manner when it came to women's decision-making power and the equality of their sources of income. In that context, he called for strengthened judicial, political, and socio-economic mechanisms that guaranteed the participation of women in decision-making processes and ensured that their work was compensated for by adequate remuneration.

BYRGANYM AITIMOVA (<u>Kazakhstan</u>) lamented that although her country had entered the tier of middle-income countries, access to certain health and social services for its population still remained at a level less than that required to meet current needs and costs, and to attain long-term population and development objectives. As elsewhere, Kazakhstan adopted and gradually implemented various national policies, laws and programmes in full compliance with the Millennium Development Goals and the Cairo Consensus.

She said strengthening the attained progress towards the Millennium targets on poverty eradication, universal access to education and gender equality and women empowerment, and mainstreaming environmental sustainability and

socially-oriented development policy throughout all national, sectoral and local strategies and process were the cornerstones of the Government's policy. Stable economic growth, social development, environmental protection, and striking an optimal balance among those aspects were important pre-conditions for implementing both international and national commitments in economic, social and related fields.

Yet, she said, the ongoing world financial and economic crisis had adversely impacted national development trends, as well as countries' capabilities to strengthen and adequately fund social protection systems. Kazakhstan regarded dealing with unacceptably high maternal and child mortality rates, as among its highest priorities. Since 2008, Kazakhstan had applied the World Health Organization (WHO) definition of live births. Despite the fact that that measure aimed to increase infant mortality data, the country looked to improve monitoring, and upgrade its healthcare system up to the internationally agreed standards. That step was undertaken to help the country achieve Millennium Development Goal 4 on child mortality reduction, and currently, Kazakhstan already had evidence of positive trends in that area.

Continuing, she said her Government attached great importance to the recent resolution on a more effective and relevant United Nations entity focused on gender equality and women's empowerment. She strongly believed that such a new composite entity with adequate institutional capacity would be capable to become a stronger advocate for gender rights and interests and women's empowerment, promote effective system-wide gender mainstreaming, and be a better fundraiser for that key aspect of development. On wider issues, she said legal empowerment of the poor, especially women, in the community and in the workplace became essential for effective reinforcing of the national poverty reduction and sustained economic growth strategies, she added.

PEDRO NÜNEZ MOSQUERA (<u>Cuba</u>), recalling the words of women's rights advocate Vilma Espín Guillois who headed Cuba's delegation to Cairo in 1994, said the right to development was still a "chimera" for poor countries. Over 1 billion people around the world were hungry, while more than 36 million suffered from HIV/AIDS. According to the last International Labour Organization report, unemployment in 2009 could increase by 18 to 30 million workers, with some 200 million workers, mainly in developing countries, who could be pushed into extreme poverty. The goal to allocate 0.7 per cent of gross national product to official development assistance was unfulfilled, and spending on military weapons and forces last year hit \$1.4 billion.

The global economic crisis had deep structural roots, he explained, pointing out that globalization had not reduced poverty. The cause of current economic and social imbalances was a lack of political will to reach a just and equitable global economic order. While some Latin American countries were advanced in their demographic transition, international support and cooperation were still needed, as the region was among the most unequal in the world. The global economic crisis would lead to a 15 per cent increase in poverty this year alone.

On top of that, over the last five decades, Cuba's development had been hindered and its population had suffered under a coercive United States blockade, which contravened international law. Despite that, Cuba had achieved progress in reducing maternal and infant mortality, ensuring reproductive rights for all citizens and working hard to prevent and control HIV/AIDS. In closing, he

reiterated Cuba's willingness to meet its population and development commitments, and to foster South-South cooperation.

ZHANG YESUI (China) said the 1994 conference was a milestone in the history of population and development and today's commemoration would give a strong boost to the Programme of Action's goals as well as the achievement of the Millennium Development Goals. Over the past 15 years, Governments had shaped plans for population development and there had been a decline in the global birth rate, an increase in life expectancy, a drop in maternal mortality rates and improved literacy rates. People now had more choices in their access to reproductive health and the Programme's principles and spirit had been widely disseminated. But the international community could not lose sight of the numerous difficulties and challenges. Developed countries had to honour their commitments.

A developing country with a large population of 1.3 billion, China had realized rapid economic growth and comprehensive development of its population. In doing so, it had contributed positively to the stabilization of the world's population. To achieve these goals, China had adhered to a basic national policy of family planning and had sought to address the population issue in an integrated matter, he said. After many years of hard work, the natural growth rate had declined to 5.08 per 1000 in 2008 and the maternal mortality rate had been reduced to 36.6 per 100,000. Secondly, China had always worked to promote gender equality and meet its citizens' needs in family planning and reproductive health.

Annual migration in China had reached 147 million in recent years, and China had worked to shape the orderly flow and reasonable distribution of population as it provided migrants with equal access to public services, he said. The country always followed a sustainable development strategy to achieve the coordinated development of population, resources and environment. To meet the present challenges, China would comprehensively implement the concept of rational development by maintaining a low birth rate, taking an integrated approach to address the sexual imbalance of newborns, strengthening services for migrant population, responding to an aging population, and other actions.

ESHAGH ALHABIB (<u>Iran</u>), calling the International Conference a "turning point" in global healthcare discussions, said 15 years on, Iran could report progress in achieving its objectives, while fully observing its cultural and religious values. Illiteracy had significantly dropped, and the number of employed women was corroborated by the fact that girls had outnumbered boys entering university for years. Dissemination of public health information, especially in rural areas, had increased public awareness of health policies, while an organized information gathering system was being used in policy development.

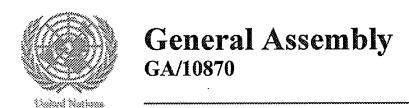
Continuing, he said birth control coverage had hit 60 per cent, and unmet family planning needs stood at less than 5.9 per cent. The Millennium Development Goal target on maternal health was in reach, with a 50 per cent improvement in the number of unwanted pregnancies recorded. In addition, the issue of healthy living for senior citizens was on the agenda of relevant ministries, and full health insurance coverage, which was free for poor families, was now in sight. OIndeed, a development-based approach to population, rather than a rights-based approach, would be more conducive in common efforts towards implementation of ICPD objectives.

DIMITRY MAKSIMYCHEV (<u>Russian Federation</u>) said his country recognized the link between population and sustainable development and the Cairo Programme of Action was a powerful example for countries aiming to produce comprehensive development policies. The Russian Federation was convinced that the ICPD action plan would make a contribution to the goals of development and improve the conditions for people. In addition, it would broaden access to education and health and reduce maternal mortality.

Over the last 15 years, he said, there had been steady improvement in those indicators. It was necessary to adhere to these standards in the midst of the financial crisis. Since the beginning of the 1990s, there had been a sharp drop in the country's population. That had been caused by changes in reproductive behaviour. The Russian Federation had adopted State policies in the field of population to address this issue. It was important as a link in social development.

He said the Russian Federation's aim to reduce the high mortality rate of the population was the work of national programmes. That included the construction of additional medical centres, more vaccination programmes and programmes to combat mortality from, among others, heart disease and from traffic accidents. There had been progress in lowering infant and maternal mortality rates. In 2008, the Russian Federation marked the year of the family. Efforts were made to improve the legislative foundation in the field of social policy, such as providing social support for children. Attention to migration was also an important part of the country's managed growth. He said the Russian Federation had a national migration policy and supported the international dialogue on migration.

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SPEAKERS IN ASSEMBLY URGE SUPPORT FOR MATERNAL HEALTH, REPRODUCTIVE SERVICES,

BACKING GOALS OF 1994 INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT

<u>Fifteen Years after Cairo Conference, Delegations Say, Much Work Remains</u>
<u>To Ensure Women Did Not Die of Preventable, Treatable Pregnancy-Related Causes</u>

While the 1994 International Conference on Population and Development (ICPD) had broken new ground in many areas — including clarifying the concept of sexual and reproductive health and setting a quantitative goal for universal delivery of such services — substantial progress must be made to stop women from dying of preventable pregnancy-related causes, delegates in the General Assembly stressed today, as they concluded their two-day commemoration of the Conference.

"In many countries, giving birth is the most dangerous thing a woman can do", the representative of Norway said, asserting that the issue just wasn't being taken seriously. In various parts of the world, women were seen as second-class citizens and their low status and a lack of gender equality were to blame for that "disgraceful situation". Moreover, unsafe, clandestine abortions continued to occur, and it was imperative to ensure that abortions were carried out in a safe manner. For its part, the Norwegian Government, this week, would present next year's budget and uphold its increased aid for women and children within the framework of 1 per cent of gross national income for development.

Gender equality was an immense challenge for the Maldives, that country's delegate said, and women's participation in both public life and leadership positions remained low. A high divorce rate forced many single women to bear the brunt of childcare and require flexible working hours. The archipelago's quarter million people lived in dispersed communities, spread over 196 islands, and the Government did not have the resources to bring social and economic conditions into balance with development goals. Mobilizing resources was central to the new Administration's development policy, and the Maldives needed civil society, private sector and Government partners to overcome such challenges.

Pakistan, like other developing countries carrying out population planning, faced issues of internal migration, rapid urbanization, a "youth bulge" and a high number of unmet needs, the country's representative stressed. With a fast-growing urban population, Government policy was focused on generating work opportunities in both urban and rural areas. The main goal was to stabilize the population and achieve sustainable human development as the country worked to reach the Millennium Development Goals and cut poverty. Striking a balance between population and resources was vital to those efforts.

Afghanistan's delegate said a worsening security situation in his country's south and southeast threatened improvements made to gender and health over the past few years. Afghanistan

struggled with high levels of maternal and infant mortality, illiteracy, a lack of infrastructure, a shortage of funds for key programmes and a lack of female staff, which impeded access to health services. While the financial crisis should not impede the provision of technical and financial aid to developing and post-conflict countries, South-South cooperation would be critical to reaching the "mammoth" development targets countries had set for themselves.

Highlighting a positive step to that end in his region, Turkey's delegate welcomed the high-level regional meeting on Millennium Development Goal 5 — maternal health — to be held in Istanbul on 11 November. Organized by the United Nations Population Fund (UNFPA) regional office, it would aim to reinforce political and financial commitments to improve maternal health and increase reproductive services for disadvantaged populations in Central Asia and Eastern Europe. To address illegal migration, it would be more realistic for countries of origin, as well as destination, to join efforts in tackling the root causes.

On that point, the Observer for the Holy See said Governments and individuals too frequently viewed migration as an unwitting consequence of globalization. Negative stereotypes were used to promote policies that had a dehumanizing impact on migrants and created unconscionable divisions within families. To truly achieve all the constructive proposals of the ICPD action plan, greater efforts were needed to enact policies that recognized the shared benefits of migration. The ICPD's call for universal access to quality education was the most effective way to promote sustainable economic, social and political development.

Also speaking today were the representatives of Japan, Netherlands, Malta, Kenya, Jamaica, Serbia, Lao People's Democratic Republic, Bulgaria, Chile, Nicaragua, Ecuador, Antigua and Barbuda, Mauritania, Brazil and Uganda.

A representative of Partners for Population and Development also spoke.

The General Assembly will reconvene at 10 a.m. Thursday, 15 October, to elect five non-permanent members of the Security Council.

Background

The General Assembly met today to continue and conclude its commemoration of the fifteenth anniversary of the International Conference on Population and Development (ICPD), held in Cairo, Egypt in 1994. (For more information, please see press release GA/10869.)

Statements

MORTEN WETLAND (Norway), recalling that after the landmark Cairo Conference, delegates had also gathered for important meetings in Beijing and Copenhagen, said the implementation of the ICPD Programme of Action was crucial to achieving the Millennium Development Goals. While substantial gains had been made in some areas, hardly any progress had been made in reaching Millennium Goal 5, on maternal mortality and maternal and reproductive health. Citing a statistic that one woman died every minute due to pregnancy related complications, he said "in many countries, giving birth is the most dangerous thing a woman can do".

The answer for that lay in the fact that the issue had not been taken seriously, he continued. In many countries, including developed nations, women were seen as second-class citizens and men, who made all the decisions, did not allocate enough resources to women's needs. Women's low status and a lack of gender equality were responsible for that disgraceful situation, and he welcomed the recent Assembly resolution to create a new gender entity to strengthen the United Nations' capacity to promote women.

Making progress on Millennium Goal 5 required significantly enhanced political will, community engagement and mobilization of resources. Continuing, he said a lack of reproductive health services made sexual activity more risky for both sexes, and young people's needs must be addressed in that context. Also, a stronger focus on young girls would reduce teen pregnancies.

On family planning, he noted that funds available for that purpose had dropped substantially and he expressed hope that that trend could be reversed.

As unsafe clandestine abortions occurred, and often led to death, it was imperative to ensure that abortions were carried out in a safe manner. His Government, this week, would present next year's budget and uphold its increased aid for women and children, their health and education, within the framework of 1 per cent of gross national income for development.

TAKESHI OSUGA (<u>Japan</u>) said his country had made great progress in the area of global health, adding that the Government raised the issue of infectious disease for the first time at the 2000 Group of Eight (G-8) Summit. The issue was now being discussed at the highest levels and foreign aid for that purpose had doubled. However, various international goals remained unmet: maternal and reproductive health, in particular, required a redoubling of efforts and allotted funding should be used in the most effective way to promote prompt delivery of services on the ground. Donors also should seek modalities of implementation that ensured access to health-care services for all those in need.

On human security, he said the ICPD action plan — which underscored the importance of reproductive health and women's empowerment, notably through their full involvement in decision-making at all levels — coincided with the ultimate goal of promoting human security: to build societies in which all people were protected. That was why the global community should reinvigorate its efforts to fulfil the Programme of Action, he declared.

Regarding health systems, he said that, to improve maternal and child health, reproductive health and the combat of infectious disease, everyone needed access to health care. To that end, national policies should be drafted with a bottom-up perspective and implemented in a way that allowed resources to align with real needs. Japan planned to contribute to human resource development in the health sector of developing countries and had committed to train up to 100,000 health-care workers.

Finally, he said international organizations, including the United Nations Population Fund (UNFPA), played an important role in implementing the ICPD Programme of Action. Japan would continue to partner with international and civil society organizations, private foundations, the corporate sector and others in implementing the Programme and related Millennium Goals. As Vice-Chair of the forty-third session of the United Nations Commission on Population and Development for the Asian Group, Japan looked forward to having in-depth discussions on population and development issues.

HERMAN SCHAPER, (Netherlands), also speaking on behalf of Burkina Faso, said although it had taken six years of hard work before the Cairo consensus was duly reflected in the Millennium Declaration, Millennium Development Goal 5b — access to reproductive health by 2015 — was not added until 2007. Regrettably, family planning and reproductive health continued to pose challenges for many countries.

If the two Millennium Goal targets on maternal health and on family planning and reproductive health, where not achieved, then the other Goals would not be attained either, he continued, adding that it was thus "smart economics" to invest in Goal 5. With growing awareness that population issues had long been neglected in the development debate, as well as in national planning, access to reproductive health services, including the widest possible choice of contraceptives, was crucial to help minimize social and economic problems, both at national and household levels.

He said there was also need to boost the involvement of men, to increase their awareness of the importance of reproductive health services for the health of their wives, children and themselves, and consequently for many other aspects of family life, including economic prosperity. Addressing the needs of young people was essential to that effort because the unprecedented number of them — more than half of the world's population was under 25 years old — made it

compelling to make their future the priority.

Concluding, he said the Netherlands and Burkina Faso called for more alignment of United Nations and other international actors with national policies and systems, further centralization, high-quality human resources and better communication and monitoring of development results. In that regard, he welcomed and supported UNFPA's active and leading role in initiatives to improve interagency coordination, harmonization of business practices and joint actions; and also underscored the importance of working with the private sector, with for-profit and not-for-profit organizations.

SAVIOUR F. BORG (Malta) said that, although his country largely shared Sweden's stance on the International Conference on Population and Development (ICPD), he still wanted to clarify Malta's position on sexual and reproduction rights, especially with regard to abortion. He stressed that ensuring women's empowerment and gender equality did not have to obligate them to consider having an abortion as a legitimate reproductive health right and service. The right to life — a fundamental human right — should also include the unborn child, from conception. Abortion denied him or her that right. It was in that spirit that Malta held the Cairo Declaration in high esteem.

He went on to say that social and economic factors were still an integral part of the Cairo legacy and that they played a prominent role in development. The world population was still tackling challenges such as the financial and food crisis, climate change, diseases such as HIV/AIDS, terrorism, natural disasters and trafficking of people and arms. Those would marginalize the Cairo Consensus and the Millennium Goals unless States committed to renewed efforts to turn the tides, by ensuring the protection of present and future generations.

States had identified many ills that had beset their societies and had singled out remedies, which could help revitalize the economy; adapt and mitigate climate change; protect the rule of law; and bolster democracy and good governance. He reiterated Member States' commitment to deliver "global goods", including through a new climate agreement in Copenhagen, bolstering the United Nations, advancing health, and countering terrorism. On the occasion of this fifteenth anniversary of the ICPD, he urged Member States to come together and to implement faithfully the Cairo Consensus and the Millennium Goals.

ZACHARY D. MUBURI-MUITA (Kenya) said the failure to fully integrate population, gender and environmental concerns in development planning at all levels was one of the factors that hampered the smooth implementation of the Cairo Programme of Action. Other factors were the slow and ineffective pace of poverty reduction programmes and inadequate links between HIV/AIDS prevention strategies with care and support.

To address those problems in a comprehensive manner, he said Kenya had instituted the "Kenya Vision 2030", a long-term blueprint meant to transform itself into a modern, globally competitive middle-income country that provided a high quality of life by 2030. In the meantime, Kenya had a medium-term plan in place and was committed to slashing the number of people living below the poverty line from 46 per cent, to 28 per cent by 2012. While Kenya had consistently undertaken policy reforms to improve all sectors of the economy, the task ahead, particularly in the area of population and development, was daunting.

He said the partnerships made over the past 15 years of implementing ICPD were critical, and he lauded the United Nations efforts. Like many other sub-Saharan African countries, Kenya feared that it would not attain all the Millennium Development Goals and targets. One of the areas that needed the most urgent follow-up was the sustainability of HIV and AIDS funding, which had been inadequate for prevention programmes.

He said antiretroviral treatment was a lifelong commitment and people on such regimens needed sustained access to the drugs. Kenya and other deserving developing countries should be considered for debt relief and cancellation without conditions. Funds targeted to priority areas would promote economic growth and development. There was a need for enhanced resource allocation for the Programme so the goals set in Cairo could be met, he said.

AMJAD HUSSAIN B. SIAL (<u>Pakistan</u>) said the 1994 consensus at Cairo had placed individual human rights at the centre of the development process and acknowledged the central role of women and young people. Today, the international community was aware of the progress made over the last 15 years and the increased challenges prompted by the present crises, particularly the current financial turmoil.

Like other developing countries carrying out population planning, Pakistan faced the issues of internal migration, rapid urbanization, "youth bulge" and high unmet needs. Pakistan's urban population was growing rapidly and Government policy was focused on generating work opportunities in urban and rural areas, he said.

As outlined in the ICPD action plan, the main objective of Pakistan's country programme was to stabilize the population and achieve sustainable human development as it worked to reach the Millennium Development Goals and cut poverty. Pakistan's population policy sought to attain a balance between population and resources as it expanded access to education, particularly for girls; reduced mortality rates; and increased access to quality reproductive health services and family planning. Pakistan was fully committed to the goals and objectives of the International Conference on Population and Development, he said.

FAZLI ÇORMAN (<u>Turkey</u>), associating his country with the statement made yesterday by the European Union Presidency, said more progress was needed to achieve the 2015 ICPD targets on gender equality and sexual reproductive health. Turkey was pleased to see UNFPA's strong efforts to lead and promote the Cairo agenda in different parts of the world. In addition, Turkey was committed to enhancing its cooperation to achieve universal access to reproductive health and enable women's empowerment.

Within that framework, Turkey welcomed the high-level regional meeting on Millennium Development Goal 5 on maternal health scheduled to be held in Istanbul on 11 November 2009. That meeting, organized by UNFPA's regional office, would aim to reinforce political and financial commitments to improve maternal health and increase reproductive services for disadvantage populations in Central Asia and Eastern Europe. The meeting would precede the high-level regional forum in Istanbul on 12 to 13 November 2009, which would mark the fifteen anniversary of the ICPD, he said.

In today's global world, migration and development were more closely linked. As the fundamental cause behind illegal migration was poverty and underdevelopment in the countries of origin, Turkey believed it was more realistic for countries of origin, as well as destination, to work together on initiatives to correct the problem's root causes. The magnitude of the illegal migration problem meant that solutions were beyond the means of a single country and required international "burden sharing", he said.

RAYMOND O. WOLFE (<u>Jamaica</u>) said, notwithstanding the myriad challenges it faced, his country had recorded several important accomplishments in its efforts to implement the ICPD Programme of Action and to make it the cornerstone of all of its policies, plans and programmes pertinent to population and development. Jamaica was among the first countries in the developing world to have set out an explicit and comprehensive national population policy following the 1994 Conference.

On universal access to reproductive health, he said that Jamaica had long had a relatively well-developed family planning programme, even prior to ICPD. With the support of UNFPA and the United States Agency for International Development (USAID), Jamaica had also embarked on a strategic programme that targeted the reproductive health-care needs of adolescents and youth. Another strategic programme aimed at the reproductive health needs of persons with disabilities focusing on adolescents and youth with disabilities had also been embarked on with the support of the UNFPA and the European Commission.

Turning to measures to control the spread of HIV/AIDS, he noted that the epidemic, which started in 1982 in Jamaica, was among the greatest challenges the country faced. The Government had formulated a national HIV/AIDS strategic plan in line with the Caribbean Community

(CARICOM) HIV/AIDS Strategic Plan of Implementation. In relation to the ICPD and the Millennium Development Goal targets of a two-thirds reduction in maternal mortality between 1990 and 2015, some national programmes implemented to date included one initiative which integrated maternal, child health, family planning and sexually transmitted infections programmes, he stated.

On promoting gender equality and empowerment of women, he asserted that Jamaica had an enviable record in that regard, noting that among the country's most important achievements had been the establishment in the 1970s of various institutions dedicated to the advancement of women, and introduction of the Women in Development Studies Programme at the University of West Indies. However, he was quick to point out that despite those successes in education for women, progress in other areas still lagged behind, including representation at the highest levels in both the public and private sectors and as it related to political representation.

MILANOVIĆ (<u>Serbia</u>) said States should be proud of progress made in carrying out the ICPD agenda, as the majority of countries had adopted national policies, laws and programmes to advance women's health, including reproductive health. Many were using population data and analysis to inform economic and social plans, more women were choosing to use family planning and, with the General Assembly resolution to establish a new United Nations gender entity, an important step towards realizing obligations for women had been made. Despite that, in many countries, mandates remained unfunded, national budgets did not meet demand and international assistance was insufficient. In Africa alone, there would be some 2.5 million maternal deaths in the next 10 years if urgent action was not taken.

While the amount of resources mobilized had increased, he said, overall funding was far short of what was required to meet current needs. Effective use of resources and increased coherence among development partners was of utmost importance. Today's difficult economic climate threatened progress made, and assistance would be needed more than ever before. Unfortunately, progress was needed to meet Millennium Development Goal 5, on maternal mortality, which would require a multisectoral approach. While he was encouraged that country-level coordination among the UNFPA, United Nations Children's Fund (UNICEF), World Health Organization (WHO) and the World Bank had increased, further work was needed in that regard.

Finally, he said climate change was the main reason for increased frequency of natural disasters and an effective response, based on scientific analysis, must be developed. He was pleased that the theme of the 2009 World Population Report, to be released next month, would be entitled: Facing a Changing World: Women, Population and Climate Change. He also welcomed the UNFPA's regionalization plan and expressed hope for finding a solution for the regional office for Eastern Europe and Central Asia, which would be based on the same principles that led to the relocation of other regional offices.

KANIKA PHOMMACHANH, (<u>Lao People's Democratic Republic</u>), reasserting his country's commitment to the achievement of the Millennium Development Goals, said it was at the same time mindful of the challenges that lay ahead, and keenly aware that, while it was on track in areas such as reducing child mortality or combating tuberculosis and malaria, maternal mortality was still very high. Although maternal mortality had decreased in the past 15 years, 405 deaths per 100,000 live births were nevertheless too many. Also, progress varied between urban and rural areas and among socio-economic quintiles.

Noting that Lao People's Democratic Republic was transforming itself from a landlocked country to a "land-linked" one with the development of road networks, he said it had a young population and a declining fertility. It was expecting growth in its working-age population over the next few decades. The Government was also aware that such factors may put the population at greater risk of reproductive ill health. Hence, there was a great need to continue investment in universal access to reproductive health for women, men and youth to protect them, to give them greater opportunities for education and employment, to alleviate population pressure on the country's precious environment, and contribute to improved food security and reduction of poverty.

He said the financial and economic crisis should not lead to a decrease in reproductive health, since such a fall off would derail the achievement of all the Millennium Development Goals.

The Government of the Lao People's Democratic Republic was, therefore, making efforts to attain greater aid effectiveness through improved coordination of development assistance by implementing the Vientiane Declaration on Aid Effectiveness, a localized version of the Paris Declaration. To that end, he encouraged UNFPA to further fulfil its commitments in leading the implementation of the ICPD Programme of Action, and among other things, welcomed the outcome of the Asia-Pacific "High-level Forum on ICPD at 15" held on 16 and 17 September in Bangkok.

RAYKO RAYTCHEV (<u>Bulgaria</u>) said one of the main achievements of the ICPD Programme of Action was placing people and human rights "in the limelight". As it articulated the links among human development, women's empowerment, health, population dynamics and economic growth, among other issues, the ICPD agenda was more relevant than ever, particularly given today's crises in food, finance and energy.

For its part, Bulgaria was firmly committed to implementing the ICPD outcome, he said, pointing first to his country's national demographic strategy for 2006-2020, which incorporated recommendations of the ICPD action plan and of the European Commission. That strategy was a blueprint for reversing negative demographic trends and guaranteeing sexual and reproductive health and rights. To address the country's youth, Bulgaria had partnered with organizations to target young people's health, education and welfare. The "Youth Peer Education Network Bulgaria", created in 2000, had established successful youth-adult partnerships, while an education training and research centre, opened in 2007 connected some 5,000 young people from 42 countries.

Finally, he said Bulgaria took its responsibilities as an emerging donor very seriously. Promoting health services, education, specialist training, and socio-economic reforms were priorities for the new development cooperation policy, which aimed to achieve the Millennium Development Goals at the global level. It was clear that, with only five years until the 2015 deadline, urgent action was needed to achieve the common goal: to improve the lives of present and future generations. To that end, Bulgaria was committed to sharing its manifold experience.

FRANCISCO DEL CAMPO (<u>Chile</u>) reiterated his country's commitment to the ICPD Programme of Action. Unfortunately, the Assembly's commemoration was taking place amid the greatest economic crisis since the 1930s. Despite some hopeful indices, gender disparity in primary and secondary education, the spread of HIV/AIDS, and high levels of maternity-related deaths persisted. Those facts should prompt States to renew their efforts to achieve ICPD goals in the next five years. In that context, he highlighted Chile's contribution to UNITAID, the International Drug Purchasing Facility, and was pleased at the adoption of General Assembly resolution 63/311 (2009) on system-wide coherence.

Continuing, he said gender equality and women's autonomy were pillars in Chile's 2006-2010 agenda, which, among other things, guaranteed basic pensions for female heads of household, expansion of childcare centres and progressive increases in the minimum salary of household workers. Also among Chile's achievements was its "completion of studies" rate, which had exceeded 80 per cent in 2006. That positive trend also was seen in the number of women who completed university, which, in turn, improved their access to employment. Chile's health plan outlined guarantees for women at risk of premature delivery and breast cancer, and for pregnant women battling AIDS. In closing, he renewed Chile's commitment to contributing to the United Nations Population Fund (UNFPA).

MARÍA RUBIALES DE CHAMORRO (<u>Nicaragua</u>) said it was utterly important and in her Government's own interest to reach the goals set out at Cairo regarding eradicating extreme poverty. Nicaragua also believed in the importance of attaining the Millennium Development Goals. She pointed out that Nicaragua had won two UNFPA awards; one for defending and promoting the sexual and reproductive health of women and girls within a human rights framework and for working on domestic violence, teenage pregnancies, HIV/AIDS and promoting gender equality; and the other, for making a significant contribution to the lives, health and dignity of women and children.

Unlike previous neo-liberal Governments, the current National Unity and Reconciliation Government had placed eradicating poverty and promoting economic development and social inclusion of previously ignored segments of society at the top of its agenda. She said that

Nicaragua had thus taken strides to include the poorest members of society in public policymaking — visibly bringing human development to the fore — to ensure equal access to basic public services such as health, education, housing and employment. Nicaraguans had gone from being marginalized to playing a central role in their country's development, placing people and not capital at the heart of their goals. The Government was relying on a four-year plan, which set out strategies to combat poverty and chronic malnutrition among the most vulnerable groups.

She went on to say that, following Nicaragua's national literacy campaign, the United Nations Educational, Scientific and Cultural Organization (UNESCO) had rendered it an "illiteracy-free zone". In terms of health, efforts to improve access had ensured families and communities were included. As a result, maternal mortality had dropped from 90 for every 100,000 registered births in 2006 to 64 in 2008. In terms of its "Zero Hunger Plan", Nicaragua had implemented a food production bonus, which was geared towards impoverished rural families and women. She concluded by appealing to developed countries to shoulder their share of responsibility to help cope with the effects of a crisis, to which they had largely contributed.

SANTIAGO CHIRIBOGA (Ecuador), aligning his statement with those made earlier in the debate by the Sudan on behalf of the "Group of 77" developing countries and China and by Mexico on behalf of the Rio Group, said there was no doubt the ICPD Programme of Action had set up the mechanisms to help development and human rights and help countries work towards a more dignified life for all. But there were many difficulties ahead, and the current economic and financial crisis created by the North posed more threats to efforts to reach internationally agreed development goals.

Ecuador had begun a development strategy to reduce poverty and assure a dignified life for all. Development was an organized convergence of solid economic, social and environmental policies that would guarantee a good livelihood for all people. Such policies had to be implemented in a consistent and organized manner. It had to restore development that would help all people, he said.

The country's national plan was in line with the Constitution of 2008, he continued. It included 12 objectives. Among those were greater social cohesion, diversity, the improvement of people's potential and quality of life, and the promotion of a sustainable environment and equality. At the same time, he said that planning for sustainable development faced challenges, especially as countries struggle to address the current multifaceted crises.

He said the devastating impact of climate change had obligated countries to rethink their development strategies. In addition, the problem of hunger, like so many other current challenges, was not one of resources, but of inadequate systems. The international community, therefore, must find new alternatives to meet today's crises, he said.

CONROD HUNTE (Antigua and Barbuda) said that, with just a short while to achieve the ICPD goals, the time was opportune to take stock of progress, assess challenges and determine what was needed to ensure that the next five years would result in complete implementation and achievement. Indeed, the ICPD had resulted in agreement on issues that were among the most worthy development goals: providing universal education; reducing infant, child and maternal mortality rates; achieving universal access to reproductive health care and preventing the spread of infectious disease, including HIV/AIDS.

For its part, Antigua and Barbuda had made modest, though significant, achievements, he explained, and recognized that full implementation of the action plan by 2014 would require significant resources and commitment. His country had been honoured to host, in August, the Caribbean Subregional Meeting to Assess the Implementation of the ICPD Programme of Action, whose goal was to discuss achievements, challenges and gaps in the region's implementation of the ICPD agenda. The meeting showed that countries had made significant progress in economic and human development, due in part, to Governments putting in place social protection policies to address the most vulnerable populations.

However, there were tough choices to make, including in reducing social spending to make

up for severe revenue shortfalls and a lack of financing for development programmes, he said. Despite tremendous challenges, his Government was committed to the ICPD agenda and the Cairo Consensus, and to moving forward with its ambitious social development programmes. Changing population dynamics brought about new challenges and an urgent call for action towards 2014 had been issued for his region. That call was needed to ensure that all stakeholders could achieve targets and outline clear priorities for results. With that, he urged the UNFPA and the Economic Commission for Latin America and the Caribbean (ECLAC) to support that call.

ABDUL GHAFOOR MOHAMED (Maldives) said his nation was a small island developing State with a population of just over 250,000. Population development was an integral part of its development strategy, yet the Government did not have the available resources and inherent social and economic situation to match its goals. Spread over 196 inhabited islands, the quarter million people in the archipelago lived in dispersed communities and transportation costs were very high. The unique physical characteristics of the islands created numerous economic, social and environmental challenges, he added.

A 10 per cent increase in population over the last five years had created a strong demand for housing and other economic and social services, he continued. The unequal access to education and health facilities in Male, the capital, had attracted more than a third of the total population, leading to overcrowding and increased rates of environmental degradation as the groundwater was contaminated and overdrawn.

He went on to say that Maldives was also grappling with the menace of drug addiction, growing violence among youth and a disturbing degree of increased violence against women. The United Nations Office on Drugs and Crime (UNODC) had declared the use of illicit narcotics as the largest challenge facing the development of Maldivian society as many people under the age of 25 were affected by drug use and abuse. Gender equality also was an immense challenge for the country and women's participation in public life and in leadership positions remained low. There was a high divorce rate, which forced many single women to bear the brunt of childcare, and prompted the need for flexible working hours and adequate social safety nets for the complete economic and social empowerment of women.

Resource mobilization was a central part of the new Administration's development policy and the country now allocated more than a quarter of its development budget towards social development, including education and health. While making some headway towards the ICPD goals, the Maldives reiterated the importance of strong partnerships between civil society, corporations and government to overcome the challenges of population development.

ABDERRAHIM OULD HADRAMI (<u>Mauritania</u>), outlining steps his country had taken since the International Conference on Population and Development, said that at the political level, Mauritania had adhered to international human rights treaties, including the Convention on the Rights of the Child. The number of women elected to offices had increased due to quotas, with women holding 18 of 95 seats in the national assembly and more than 1,120 seats in municipal councils. There was also a female mayor in a rural area. At the institutional level, there were new laws to combat discrimination against women, including legislation on obligatory primary education. There was also a 20 per cent quota for women's representation in parliament and municipal councils. He also highlighted public authorities' focus on issues like female genital mutilation, tattooing and gender-based violence.

On the economic level, however, he said any gains remained far below expectations. While Mauritania had paid attention to education in general, and for girls in particular, its efforts had been hampered by a high dropout rate among girls, which reduced their integration into daily life. While there had been some improvements, including a drop in maternal mortality and the creation of a strategy for children's survival, there was a long road ahead to overcome obstacles to women's full participation on all levels.

Among the challenges, he noted that the law making education obligatory had not been accompanied by measures for continued study. Mauritania's maternal mortality rate was among the highest in the region and women's literacy lagged behind that of men. Women's access to credit

was still difficult, and included a lack of capital and guarantees. Similarly, women's unemployment was "very high", at 47.3 per cent. National coordination had to be strengthened. The country faced difficulties to the Millennium Development Goals and expressed hope to see increased support from its development partners.

ZAHIR TANIN (<u>Afghanistan</u>) praised the UNFPA for its leadership in implementing the ICPD Programme of Action, as well as its assistance to Afghanistan. He underscored that the Conference was a breakthrough in terms of how States collectively understood the link between people and economic development and how it revolutionized approaches to reproductive and human rights. This, he added, informed the Millennium Development Goals.

Saying that his country remained committed to the ICPD Programme of Action and to the achievement of the Millennium Goals, he noted that, through various national strategies, Afghanistan was aiming to rebuild its battered infrastructure and economy, to improve people's daily lives through security, access to basic services and health care, and focusing on the rights of women and children. Although improvements had been made, he hoped that the international community's support would ensure that all Afghans led healthy, dignified lives.

Noting that health-care indicators had improved since the fall of the Taliban in 2001, he said access to basic health services had jumped from 9 per cent in 2001 to 85 per cent in 2008. Overall, roughly 15 per cent of women that had given birth in the past two years had done so in an institution. Up from 1 million in 2001, more than 6 million children were now in primary and secondary education, of which, at least 30 per cent were, unlike under the Taliban, women and girls.

Still he said the country struggled with high levels of maternal and infant mortality, illiteracy, a lack of infrastructure, a shortage of funds for key programmes and a lack of female staff, which impeded access to health services. A worsening security situation in the country's south and southeast had affected improvements made in gender and health over the past few years, and was preventing the Millennium Goals from being reached in Afghanistan, he warned.

He urged Member States to redouble efforts to attain those and other internationally agreed development goals within the larger framework of the ICPD Programme of Action. He stressed that South-South cooperation through regional and multilateral bodies would be crucial to reaching such targets. He concluded by urging that the financial crisis should not impede providing technical and financial aid to developing and post conflict countries in particular. Despite groundbreaking progress over the past 15 years, he urged Member States to join efforts to attain the mammoth goals they had set themselves.

MARIA LUIZA RIBEIRO VIOTTI (<u>Brazil</u>) said it was important to highlight that the Cairo Conference had perceived social and economic development as a critical component of long-term sustainability, particularly as regarding gender balance, social inclusion, environmental protection, and equal treatment and opportunities provided to different age groups.

Brazil had recognized the importance of the Cairo themes before 1994. In 1988, its Constitution recognized the provision of health services as a right of all citizens and an obligation of the Brazilian State. She said the Brazilian Government had created a Universal Health System, which guaranteed free public health care and services to all people, including people suffering from sexually transmitted diseases such as HIV/AIDS. Deeply concerned with the spread of HIV/AIDS among women, the Government had also created specific programmes to reduce the vulnerability of women and teenagers to the virus.

The country had achieved remarkable progress in many areas regarding the advancement of women. Since the creation of the Special Secretariat on Policies for Women, the Government had adopted a series of cross-cutting policies, plans and programmes to empower women, reduce gender inequalities, and promote social inclusion. Important steps had been taken to fight violence against women, such as the "Maria da Penha Law". That legislation helped enforce legal protection in cases of domestic violence against women and girls.

She said Brazil was fully implementing the Cairo agenda on sexual and reproductive health

and its national policy for women's health, created in the 1980s, had integrated the strategies for reducing maternal and neonatal mortality rates that were laid out in Cairo. More work was needed to promote gender equality and reduce maternal and neonatal mortality. Each country had to redouble its national efforts and recommit to greater cooperation towards the fulfilment of the Cairo Programme of Action over the next five years, she said.

RUHAKANA RUGUNDA (<u>Uganda</u>) said the Conference presented Uganda with an opportunity to learn from others about how to make progress in the areas of reproductive health, education and development. After Cairo, Uganda formulated and adopted a national population policy for sustainable development. In 2007, that policy had been revised to fit the 2007-2015 national development plan, which aimed to improve maternal, neonatal and reproductive health to achieve Millennium Development Goal 5 on maternal health.

Like other African countries, Uganda had a high maternal mortality rate and strengthened partnership among all stakeholders was needed to meet the goal of reducing it by 2015. In finalizing its national development plan, the Government aimed to reduce maternal and neonatal morbidity, and all actions under the Maputo Plan of Action. Further, Uganda was committed to increasing resources, programmes and activities to implement the ICPD Programme of Action, and there was a need for updated population and development data to guide decision-making.

To address priority areas, Uganda had put in place programmes to speed economic growth and provide universal primary education, he said. It also had put forward a draft bill to reduce female genital mutilation. The country was making other positive steps in the area of reproductive rights and family planning. Uganda's success in reducing HIV prevalence from 18 per cent to 6.7 per cent would be sustained through a focus on prevention. Addressing unmet needs for family planning would mean that upwards of 60 per cent of women would access reproductive health, a level comparable to any middle-income country. The initiative to boost secondary education would help delay marriages and provide women with better choices for career and family. In closing, he said Uganda was committed to working with its development partners to implement the ICPD Programme of Action.

CELESTINO MIGLIORE, Observer for the <u>Holy See</u>, said that, when the Cairo Conference was held in 1994, many States believed that a population explosion would occur and hamper their ability to achieve adequate global economic development. That perception had turned out to be unfounded and, in many developed countries, population demographics had declined so steeply that some national legislators were encouraging an increase in birth rates to assure continued economic growth.

At the same time, he continued, development was occurring at previously unachieved rates in many developing countries and the greatest threat to growth stemmed from irresponsible world and local economic management, not a population explosion. For nearly a century, attempts had been made to link global population with the food, energy, natural resources and environment crises. Yet human ingenuity and the ability of people to work together showed that people were the world's greatest resources.

Demographic policies had to take the needs of migrants into account as part of an overall responsibility to place humans at the centre of all development policies. Governments and individuals too frequently viewed migration as an unwitting consequence of globalization, he said. Negative stereotypes of migrants were used to promote policies that had a dehumanizing impact and created unconscionable division within families. In order to truly achieve all the constructive proposals of the ICPD action plan, greater efforts were needed to enact policies that recognized the shared benefits of migration. The ICPD's call for universal access to quality education was the most effective way to promote sustainable economic, social and political development.

In addressing the role of the ICPD on maternal health, attempts were made too frequently to promote a notion of sexual and reproductive health that was detrimental to unbom human life and the integral needs of women and men in society. Suggesting that reproductive health included a right to abortion explicitly violated the language of the ICPD, defied moral and legal standards within local communities and divided efforts to address the real needs of mothers and children, he said.

The Catholic Church remained committed to providing access to health care for everyone and did so with more than 5,000 hospitals, 18,000 health clinics and 15,000 homes for the elderly and disabled and other Catholic-based health-care programmes around the globe.

JYOTI SHANKAR SINGH, of <u>Partners for Population and Development</u>, said the International Conference on Population and Development had many "firsts" to its credit. Among others, it had marked the first time a comprehensive definition on reproductive health, including family planning, had been established by 179 countries. Since 1994, the ICPD definition of reproductive health had been increasingly adopted by nations in their formulation of relevant policies and programmes. The Conference also set the first quantitative goal for the universal delivery of reproductive health services, which also included qualitative goals aimed at improving the quality and effectiveness of family planning, and estimates for mobilizing resources needed to achieve goals.

The Cairo Conference had broken new ground in other areas, too, he continued, as it underscored the importance of instituting and implementing population policies that met the needs of individual men and women. It gave full support to the concept of partnership between Governments and civil societies, and would especially be remembered for the clear links it established between women's right to chose and their empowerment. It also provided unstinting support to the concept of South-South cooperation. However, insufficient progress had been made, notably in the areas of universal reproductive health services and maternal health. The current economic crisis made that task "doubly difficult". Today's commemoration provided an opportunity to redouble efforts to achieve the ICPD and Millennium Development Goals.

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