



**Partners in Population and Development
A South-South Initiative**

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**Statement by
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**Mr. Chairman,
Distinguished Delegates,
Ladies and Gentlemen,**

Thank you very much for giving me this opportunity, on behalf of the Partners in Population and Development (PPD), to make a brief statement at the Forty-fourth session of the Commission, under agenda item 4. PPD, as most of you know, is an intergovernmental organization of 25 developing countries dedicated to the promotion and strengthening of South-South cooperation in population and development. Through advocacy, policy dialogues, exchange of information, research, training and technical cooperation, it assists both its member countries and many non-member countries in implementing the Programme of Action of the International Conference on Population and Development (ICPD), within the broader framework of the MDGs.

This forty-fourth session of the Commission is noteworthy for many reasons. First, the special theme of the session dealing with fertility, reproductive health and development is significant for its pride of place it enjoys in the entire Cairo Programme of Action and for the most forward-looking recommendations to address it; and second, the session is crucial since it is going to initiate the debate on the further implementation of the ICPD Programme of Action in the light of its twentieth anniversary in 2014.

The importance of fertility and family planning for reproductive health, population growth, sustainable development, human rights and gender empowerment cannot be overemphasized. As the Secretary-General's report (E/CN.9/2011/3) has noted, the fertility rate in developing countries has declined from 6.0 children per woman in early 1950s to an estimated 2.6 children in 2005-2010, with concomitant declines in the annual rate of population growth. After reviewing the literature linking fertility, reproductive health and development, the report concludes that "ensuring universal access to reproductive health-care services and, in particular, meeting the need for family planning, can accelerate the improvements in maternal and child health, especially in high-fertility countries, and thereby slow fertility rates, a decrease that can, in turn, be beneficial for development." This finding is of major implications to many of the Least Developed Countries (LDCs) and other poorer

developing countries that are yet to attain rapid demographic transition and sustained economic growth.

In another report (E/CN.9/2011/6) to the Commission, the Secretary-General rightly cautions against the generalized view that prevails in many quarters that population trends are no longer an issue of concern in regards to the development or sustainability of life on the planet. By conducting a comparative analysis of long-term population projections using different scenarios, the report demonstrates convincingly how even a slight difference in the assumed levels of fertility over a long period of time makes a very momentous difference in the ultimate size of the population, with serious implications for the future, especially for climate change, food security, energy and other issues. Taken together, the two reports of the Secretary-General underline the crucial importance of continually and effectively addressing the issue of fertility and family planning.

Although the ICPD Programme of Action called upon countries to adopt the reproductive health approach to resolve these interrelated issues, and many countries have indeed undertaken actions in that regard, yet, the progress towards reaching the target of universal access to reproductive health services remains mostly a distant possibility. Furthermore, the risk of maternal mortality continues to remain high in too many poorer countries, the unmet need for family planning continue to be very high globally at 215 million, and the issue of adolescent reproductive health has not yet attracted the serious attention it deserves.

Added to these and other substantive concerns, the inadequacy of currently mobilized financial resources to meet the growing needs in population and reproductive health is a big challenge. Current funding levels are way below what is necessary to realize the goals of ICPD Programme of Action and achieve the Millennium Development goals (MDGs). Of particular concern here is the decreasing proportion of funding for family planning services. According to UNFPA, if this is not reversed it "may have serious implications for countries' ability to address unmet need for such services and could undermine efforts to prevent unintended pregnancies and reduce maternal and infant mortality." Allocations to HIV/AIDS programmes have grown several-fold. While nobody would argue in favour of reduction in support for HIV/AIDS programmes, there is a clear case for a much larger allocation

to family planning, in order to meet the unmet need for family planning and to support the integrated implementation of MDGs 4, 5 and 6.

PPD would like to inform the Commission that, in collaboration with the Government of Indonesia, it recently organized an International Conference on "Promoting Family Planning and Maternal Health for Poverty Alleviation" in Yogyakarta, the Republic of Indonesia. Among the many issues discussed, the Conference examined human, financial and other constraints that limit progress towards achieving goals set at the International Conference on Population and Development (ICPD) and the Millennium Development Goals and targets. After deliberations, the Conference adopted the Yogyakarta Declaration containing a number of recommendations to accelerate progress towards achieving the ICPD Goals and the MDGs, laying particular emphasis on improving access to maternal health and family planning services and reducing poverty and promoting sustainable development.

PPD wishes also to stress the intrinsic linkages that exist between population dynamics, climate change and sustainable development. According to a recent report¹, if women worldwide were able to fully exercise their reproductive wishes, 1-2 billion tons of emissions could be averted each year, or will be 15 percent lower for the lower, middle and upper-middle income countries in 2020². PPD will in October/November 2011 organize an International Conference on the above issue in collaboration with the Ministry of Social Development of South Africa in Pretoria for Ministers of Health and Population, and senior government officials of 30 developing countries most vulnerable to climate change and their effects.

The debate at this session on ideas and thoughts on further implementation of ICPD Programme of Action is invaluable for population and reproductive health agenda at national, regional and global levels in the future. PPD believes, like so many other countries and institutions that the ICPD Programme of Action remains valid and relevant for many more years to come. Thus, PPD is very pleased that the UN General Assembly has decided to extend the ICPD Programme of Action and the key actions for its further implementation beyond 2014 and to ensure its follow-up in order to fully meet its goals and objectives.

¹ O'Neill, Brian C. "Global demographic trends and future carbon emissions" PNAS vol. 107 no. 41, October 12, 2010, www.pnas.org/content/107/41/17521

² UNFPA State of World Population 2009

Furthermore, the General Assembly's directives to "assess the status of implementation of the Programme of Action and to renew political support for actions required for the full achievement of its goals and objectives," as well to "undertake an operational review of the implementation of the Programme of Action on the basis of the highest-quality data and analysis of the state of population and development" are pragmatic and appropriate. PPD welcomes these developments.

In closing, the PPD looks forward to the debate on all these issues at this session, and stands ready to contribute PPD's experiences in south-south cooperation in population and development to the planned operational review of the implementation of the ICPD Programme of Action. We would like to stress the importance of promoting South-South Cooperation in achieving ICPD Goals and the MDGs. We have among the South tremendous potentials, expertise and know-how, and if these are adequately tapped, meaningful difference could be made. It is unfortunate to note that South-South Cooperation as a modality of change is not adequately funded and supported. ODA from the North has been well below the mark, especially in promoting South-South Cooperation in the field of Reproductive Health and Population. We make an appeal to countries from the North to provide greater support to North-South Cooperation as a complement to South-South Cooperation.

Thank you, Mr. Chairman, for your attention.