



STATEMENT ON BEHALF OF THE GROUP OF 77 AND CHINA BY MR. AWSAN AL-AUD, SECOND SECRETARY, PERMANENT MISSION OF THE REPUBLIC OF YEMEN TO THE UNITED NATIONS, AT THE FORTY-THIRD SESSION OF THE COMMISSION ON POPULATION AND DEVELOPMENT (New York, 12 April 2010)

Excellencies,
Distinguished Delegates,

1. I have the honour to speak on behalf of the Group of 77 and China.
2. The Group welcomes this opportunity to address the 43rd Session of the Commission on Population and Development. We thank the Secretariat for the preparation and presentation of the reports submitted to aid our debate.
3. We also wish to thank the Population Division of the Department of Economic and Social Affairs for the materials that will inform and guide our deliberations.

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4. The Group of 77 and China firmly believes that the goals and objectives set out in the International Conference on Population and Development (ICPD) Programme of Action, as well as in other outcomes of the major United Nations conferences and summits, provide a comprehensive framework for issues pertaining to population and development. The implementation of the ICPD Programme of Action is crucial for the eradication of extreme poverty as well as the achievement of the other Millennium Development Goals. The Group believes that population issues must continue to be addressed in a comprehensive manner as outlined in the ICPD Programme of Action.
5. Health is central to meeting the Cairo agenda and all the MDGs. In developing countries, poverty and hunger are major determinants of health. Education and the empowerment of women which could significantly contribute to the improvement of maternal health and a decrease in child mortality, in spite of the significant efforts undertaken by developing countries and some achievements in that regard, have not yet improved at appropriate levels. Many developing countries are off track to achieve MDG 5 to improve maternal health, in particular Africa and South Asia where maternal deaths account for nearly 84%.
6. Today, we see that the poorest people have the least access to social services and health-care. When it comes to education and health, it is the poorest who continue to be left behind. There is no question regarding the primary responsibility of the State for the well-being of its people and the Group is committed to continue taking bold steps in the fight against poverty and suffering. The ability of developing countries to do so is hampered by other imperatives. Speedier and deeper debt relief, along with increased flows of ODA, and fairer terms of trade, among other factors, will further enable developing countries to make greater progress in meeting their needs and hopes for a better future. We also should not ignore the fact that the negative impact of international crises, including the financial and economic crisis, the energy crisis and food security is far from over. It may well be argued that their full effects remains to be seen, especially in developing countries, and in particularly the least developed countries (LDCs), who has been forced to cut back their

public and private spending on social services such as health-care, education and poverty reduction programmes.

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7. Modern medicine has made huge advances, but these advances have benefited just a small percentage of the world's population---and almost exclusively in wealthier settings. Huge inequalities exist across countries and within countries. Inequalities in child and adult mortality are large and are growing. For instance, a girl born today can expect to live for more than 80 years if she is born in some countries-but less than 45 years if she is born in others. Diseases like HIV/AIDS, tuberculosis, malaria and other infectious diseases, which are treated with overwhelming success in affluent settings, are too often a death sentence for the poor. Inequities also exist within countries.

8. The right to the highest attainable standard of physical and mental health is inextricably linked with the accessibility and affordability of medicines and treatment. Therefore, intellectual property rights must not prevent developing countries from taking measures to protect public health. The TRIPS Agreement must be interpreted and implemented in a manner supportive of developing countries' right to protect public health and, in particular, to promote access to medicines for all. In order to achieve that goal, it is fundamental to preserve and reinforce the rights to issue compulsory licenses and to parallel importation, in the case of developing countries with insufficient or no manufacturing capacities in the pharmaceutical sector.

9. The international community should also reject the use of unilateral coercive measures that affect the access of populations to medicines and advanced technologies in the area of public health.

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10. The HIV/AIDS epidemic continues to expand throughout the world, erasing decades of social and economic progress and having a devastating impact on population in terms of increased morbidity and mortality. For some countries, the demographic impact of AIDS is enormous. This has serious consequences for their development prospects, as they are losing their productive human resources. In 2008, about 33 million people were living with HIV, 22 million of whom lived in sub-Saharan Africa. That year, 2.7 million people became newly infected with HIV and AIDS killed 2 million persons, half of those living with HIV are women and half of new infections occur among young people aged 15 to 24. On the other hand, the international community should pay more attention to the non-communicable diseases. The recent figures shows that non-communicable diseases causes 60 per cent of deaths worldwide and 72 per cent of those in middle-income countries, and their share of the burden of disease is expected to increase in the future.

11. The Group of 77 and China reaffirms the fact that access of women to health care would increase their productivity and also help to reduce maternal, as well as child mortality rates. To fight against the spread of HIV/AIDS, malaria, tuberculosis and other infectious diseases would be to improve the health of women and girls who are disproportionately affected by these challenges. In this regard, the international community should also give priority attention to the plight of people living under foreign occupation and put an end to their suffering, including by removing obstacles facing the development of their health system and by ensuring access to health care and services.

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12. Resource gaps are especially large in poor countries, and the least developed countries entirely depend on ODA. Unless new, additional and sustained resources are provided to developing countries, it is unlikely that most of the goals and targets of the Program of Action (POA) will be met. Instead, there will be a worsening of the population and reproductive health situation in many poor countries. In this regard, the Group notes with great concern the fact that the estimates for 2009 show signs that donor countries have reduced the already scarce resources they allocate to Official Development Assistance (ODA). The Group of 77 and China reiterates that any financial contraction by donor countries under the pretext of the global financial crisis and continuing wavering on their earlier commitments would be detrimental to the achievement of the health-related targets set at Cairo and to those contained in the MDGs. The Group, therefore, urge developed countries to fulfill their commitments.

13. On the other hand, it is important to recognize the contribution that South-South cooperation has made over the years to the achievements in the area of health. Numerous programmes, within that context, have been put in place with the participation of various countries of the South, to increase access to health care of the more disadvantaged populations in many parts of the world. Nevertheless, scarcity of financial and technical resources continues to impede efforts to extend and diversify those programs. In that regard, we call on the developed countries to support more actively the efforts of the South in those endeavors.

14. Finally, the G-77 and China wishes to commend the work of the UN Population Division and the role it plays in the follow-up of the implementation of the ICPD Programme of Action. We also wish to acknowledge the United Nations Population Fund for its continued support to building the capacity of developing countries for population planning and management activities including in the areas of national policy formulation, data collection, research and advocacy.

I thank you.