

Statement
by
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Roundtable: Health and Women

Chairperson,
Excellencies,
Distinguished Delegates,
Ladies and Gentlemen,

1. It gives me great pleasure to join you at the Second Ministerial Conference of the Non-Aligned Movement Countries on the Advancement of Women. Allow me to congratulate the Government of Guatemala and the organizers of this Conference and, in particular, of this roundtable on health, for organizing a timely discussion. Thank you for extending a kind invitation to me.

Excellencies,
Distinguished Delegates,

2. Half way to the target date for the achievement of the Millennium Development Goals (MDGs) where do we stand with regard to women's health? The 2008 MDGs report informs us that in 2005, over half a million women died during pregnancy, child birth and shortly after, 99 per cent of whom were in developing regions. One in every 22 women in Sub-Saharan Africa is likely to die from treatable or preventable complications compared to one in 7.300 in the developed regions.

3. At the global level, maternal mortality decreased less than one per cent per year between 1995 and 2005 –four below the 5.5 per cent annual target set by the MDGs. Northern Africa, Latin America and the Caribbean and South-Eastern Asia managed to reduce their maternal mortality ratios by about one third during this period, though progress in these regions was insufficient to meet the target. This is a somber picture. The report signaled the urgency of accelerated improvements in all dimensions of reproductive health care in all regions if the goal is to be achieved.

4. With regard to MDG4, while mortality rates for children under five decreased from 93 to 72 deaths per 1.000 births between 1990 and 2006, in 62 countries, the

mortality rate was stagnant or getting worse. Sub-Saharan Africa, which has one fifth of the world's children under five, alone accounted for one half of all child deaths.

5. Turning to MDG6, while acknowledging some small achievements, the report noted that in almost every region, women represent a growing share of people living with HIV. In 2007, 950,000 people living with HIV received antiretroviral therapy. However, with 2.7 million new infections that year, the need for treatment outpaced the availability of antiretroviral drugs. While the percentage of women living with HIV globally has remained stable (at 50 per cent) in recent years, women's share of infections has been increasing in a number of countries in Asia, Eastern Europe and Latin America. According to UNAIDS, in 14 of 17 African countries with adequate survey data, the percentage of young pregnant women who are living with HIV has declined since 2000-2001, yet, among young people in Africa, HIV prevalence tends to be notably higher among women than among men. Young women represent about two-thirds of all new cases making them the most affected group in the world.

6. Women also suffer from non-communicable disorders, such as diabetes, hypertension, cardiovascular disease and cancer. In many countries, malnutrition, and lack of access to clean water and sanitation cause ill health and death among women and girls. About one billion people do not have access to safe drinking water, and 2.5 billion lack access to basic sanitation services. Many women worldwide spend an inordinate amount of time fetching water. When schools lack private and decent sanitation facilities, many girls drop out of school. In 2006, more than eight out of ten people without access to improved drinking water sources lived in rural areas while seven out of ten people without improved sanitation also lived in rural areas.

**Excellencies,
Distinguished delegates,**

7. The slow pace of progress remains a cause of concern. It reflects on the one hand a lack of political will despite the global commitments emerging from world conferences and summits and on the other the persisting ingrained gender inequality and denial of women's rights.

8. MDG3 targets the elimination of gender disparities in primary and secondary education. Education for girls is key to better opportunities, knowledge and quality of life. Education of girls protects them from early marriages. An educated woman stands a better chance to obtain a well paying job with a possibility of being raised above poverty level. The 2008 MDG report found that low-paying jobs left "one in five workers in developing countries mired in poverty." Without decent employment for many millions of women, jobs provide little relief from poverty.

9. In the current global environment, the financial crisis, the threat of climate change and the food crisis, exert an impact on the prospects for good health for women and girls. The financial crisis is compelling many governments to cut-back on public spending. Specifically, cut-backs in public social expenditure, including social services, basic

health services, education and training, have a disproportionate impact on women and girls, which, in turn, has serious implications for gender-equality, empowerment of women and sustainable development in the medium- and long-term.

10. In countries such as Jamaica, Malaysia, Sri Lanka, Thailand and Tunisia, significant declines in maternal mortality have occurred as more women have gained access to family planning and skilled birth attendance with backup emergency obstetric care. Many of these countries have halved their maternal deaths in the space of a decade.

11. The percentage of HIV-positive pregnant women receiving antiretroviral drugs to prevent mother-to-child transmission rose from 14 to 33 per cent between 2005 and 2007. In this same period, the number of new infections among children fell from 410,000 to 370,000. Several countries such as Argentina, the Bahamas, Barbados, Belarus, Botswana, Cuba, Georgia, Moldova, the Russian Federation and Thailand have achieved close to universal access to antiretroviral drugs, more than 75 per cent for prevention of mother-to-child transmission.

12. Finding trained health workers to deliver emergency obstetric care is often a challenge in the developing world's rural areas. UNFPA, in partnership with the Tigray regional health bureau (Ethiopia) and Médecins du Monde, an international NGO, has piloted an innovative project to train mid-level health officers so that they can provide life-saving emergency surgery at rural hospitals, where doctors are scarce. A positive evaluation of the project has opened the way for national scale-up to train health officers in integrated obstetric and emergency surgery. By doing so, access to critical life-saving obstetric services will be substantially improved for rural women.

**Distinguished delegates,
Ladies and Gentlemen,**

13. Good health is essential to leading a productive and fulfilling life. The right of women to control all aspects of their health, including their ability to plan the size of their family and to negotiate safe sexual relations, is basic to their empowerment. Women's ill-health places a considerable burden on them and their families, their communities and societies. Women in poor health are not able to fully take advantage of educational and employment opportunities nor to participate in political processes. Women's poor health thus undermines all efforts to achieve not only gender equality, but also to create prosperous, thriving societies.

14. At the High Level Event on the Millennium Development Goals held on 25 September 2008 at the United Nations, it was underlined that promoting gender equality and empowering women were some of the effective ways of combating poverty, hunger and disease.

What needs to be done to improve the health of women?

15. In order to translate awareness into better outcomes for women's health the following measures are proposed:

- Strengthen health systems, establish dedicated national programmes and secure basic infrastructure for water and sanitation urgently, to reduce maternal mortality and ensure universal access to reproductive health services.
- Focus must be given to implementing scaling up health, water and sanitation interventions targeting in particular, the rural poor and slum dwellers.
- Establish multi-year commitments on ODA for health to poor countries to increase substantially, funding for the health sector in particular for maternal, newborn and child health.
- Governments, with participation of women, must undertake healthcare reforms to develop national health systems that deliver quality services and retain professional staff, in addition to developing primary healthcare centres to ensure universal coverage for essential health services, including for disadvantaged populations in rural areas and urban slums.
- A cadre of trained community health workers must be developed in order to expand women's access to health care, including timely reproductive health and emergency obstetric care services.
- Governments must make efforts to create closer linkages between HIV/AIDS interventions and sexual and reproductive health care to reduce unsafe sexual risk-taking behaviours, and reduce the spread of HIV and other sexually transmitted infections.
- Measures must be taken to avert the emerging links between the credit crunch and rising incidence of domestic violence against women, a factor that contributes to women's ill-health.
- Enhance the health awareness of women, families and communities to the needs of pregnant women and their newborns as well as symptoms of pregnancy complications to enable early action.
- Eliminate cultural and traditional practices that surround pregnancy and delivery such as designation of women as "unclean" and therefore isolate them through enforced confinement.
- Enact laws to eliminate child marriages, female genital mutilation and other negative practices which affect the health of girls and women.

16. Improving the health of women and girls is a matter that requires stronger political will and commitment of substantial resources. Devaluation and neglect of women has serious human, economic and financial costs. On the other hand, investing in women and girls has a multiplier effect on poverty reduction, productivity and sustained growth of nations. Let us end the devaluation of women, accord them their human rights and uplift our societies.

Thank you.