



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

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**Statement by
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Madam Chairperson,
Distinguished Delegates,
Friends

Thank you very much for giving me this opportunity to make a few comments on ICPD+15 related items, on behalf of the Partners in Population and Development (PPD). As many of you will recall, the Partners was established at the Cairo Conference as an intergovernmental coalition of developing countries dedicated to the promotion and strengthening of South - South cooperation on population and development. Partners, whose membership has grown from 10 countries in 1994 to 22 now, celebrates its 15th anniversary along with the ICPD+15.

In November 2008, PPD chose to focus on ICPD +15: Progress and Prospects, at an International Forum and its annual Board meeting held in Kampala, Uganda. The Declaration adopted at the conclusion of the Forum, notes with concern that family planning is losing its centrality in terms of budgetary allocations as well as its place in poverty reduction strategies and in population and reproductive health policies and programmes and points out the need to reposition family planning as a priority in development. It recognizes that universal access to reproductive health services, including family planning services, is central to achieving MDGs by 2015 and calls on governments, NGOs and the international community to increase the access to and availability of family planning and reduce the unmet need for family planning services and to bridge the gap between the rich and the poor.

In this context, I note that in her opening statement to this meeting, the Executive Director of UNFPA Ms Thoraya Obaid pointed out that the allocations to family planning in international population assistance have come down from 55 per cent in 1995, totaling \$ 723 million, to 5 per cent in 2007 totaling \$338 million. If this does not change, the low funding for family

planning, as Ms Obaid says clearly, threatens to derail our collective efforts to achieve the MDGs and especially the target under MDGs to provide universal access to reproductive health. We sincerely hope that the outcome of this session will pay special attention to this point.

In the same context, we have noted with great interest the suggestion from UNFPA that time has come now to revise and update the estimates adopted at ICPD for various components of the costed population package. Mr. Werner Haug of UNFPA provides a provisional cost estimate \$ 49.1 billion a year for sexual and reproductive health programmes, including family planning and maternal health. This would mean more than doubling of the previous estimates. The new UNFPA proposals need to be debated in various meetings and conferences dedicated to ICPD+15 so that a consensus can be formulated on what is needed now and on how best to raise further support for reproductive health programmes.

In conclusion, I would like to submit that while recognizing the integral relationship between the ICPD goals and the broader development goals, including MDGs, we must keep reminding ourselves that there are two other aspects of these goals that are equally important – women’s health and the basic right of both men and women to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. If the specific ICPD goals (particularly those relating to reproductive rights, family planning and reproductive health and adolescent sexuality) are to be achieved by 2015, it will be essential for Governments, civil society organizations and the international community to develop and implement clearly targeted policies and programmes with their own updated benchmarks against which progress can be measured. They will also have to undertake more committed and sustained efforts on advocacy, and resource mobilization relating to these goals, particularly for the poorer countries (most of which are in Africa).

Thank you.