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இலங்கையின் பிரதம அமைச்சர்
Prime Minister of Sri Lanka

Keynote address by Hon. Harini Amarasuriya, Prime Minister of the Democratic Socialist Republic of Sri Lanka at the 58th Session of the Commission on Population and Development

7 - 10 April 2025, New York

Theme: Ensuring healthy lives and promoting well-being for all at all ages

Excellencies,
Distinguished Delegates,
Ladies and Gentlemen,

At the outset, allow me to congratulate the Chair and the members of the Bureau on their election to the 58th Session of the Commission on Population and Development.

My first job soon after graduating from university was in community health where I worked closely with Family Health Workers, also known as Family Health Midwives, in several districts of Sri Lanka. These health workers accessed families with pregnant and lactating mothers and children under 5 years of age in the most remote areas of every district in Sri Lanka. They worked through civil wars and natural disasters. The sight of a woman in a white and brown uniform, sometimes on a bicycle, sometimes on foot, is a common and reassuring image in Sri Lanka. It was during that time, working with these family health workers, that I truly understood the value not only of Sri Lanka's investment in public health care, but also the focus on the wellbeing of women and children, sexual and reproductive health and primary health care. Despite many challenges and gaps – this system still prevails and is the main reason, why Sri Lanka performs well on many significant health indicators. Yet, although there is compelling evidence from countries such as Sri Lanka about the gains from investment in public health systems, especially SRH and related services, it is unfortunate, that the focus is not just diminishing, but even reversing globally.

Even in present times, thousands of mothers and infants die in childbirth due to lack of medical intervention, thousands of people die at homes or on the roads because they do not have access to free medical services and millions of children drop out of school due to family's struggle to

settle medical bills. These are a few common problems faced by citizens who live in countries that do not offer universal health coverage to their citizens.

It is therefore an honor for me to deliver the Key Note address on an issue that lies at the very heart of human dignity: ensuring healthy lives and promoting well-being for all, at all ages. This is enshrined in the Sustainable Development Goals (SDGs), specifically in SDG 3 but it is closely linked to most other SDGs, including SDGs one, two, four, five, six, ten, 11 and 12, to name just a few. As we gather today, we must acknowledge the complex and increasingly fragmented global landscape which both challenges and demands our collective action in the pursuit of these goals.

Ensuring healthy lives and promoting well-being for all, at all ages, necessitates a broad understanding of health. It includes health promotion, preventive healthcare and curative health care at community and tertiary levels. It requires addressing communicable diseases, non-communicable diseases, mental health and wellbeing, sexual and reproductive health and rights. It requires health education. However, in recent years, we have seen limited investments being made in health promotion, health systems strengthening and health education – all of which are essential to ensure healthy lives and promote well-being.

This is especially true when it comes to the more sensitive and gendered health issues: sexual and reproductive health and rights (SRHR) and mental health for example. Despite substantial economic returns associated with investing in Sexual and Reproductive Health and Rights (SRHR) and Universal Health Coverage (UHC), through improved productivity, education, and lower public health costs, we are witnessing the stalling of progress in key areas, including maternal and child health and access to vital health services.

It is alarming to observe the growing resistance to sexual and reproductive rights and gender equality, in many regions. This threatens to undermine the progress made under frameworks such as the International Conference on Population and Development (ICPD), which has long been a cornerstone of our efforts to ensure reproductive rights for all. The protection of individuals from sexual and gender-based violence, and the growing concern over technology-facilitated violence, pose serious setbacks in achieving reproductive rights.

It is our collective responsibility to ensure that progress on these issues is not only protected but expanded.

Simultaneously, the world is undergoing a demographic transition that demands our immediate attention. Aging populations and declining fertility rates in many countries, present challenges to the sustainability of healthcare systems. In the Global South, where limited resources face growing demand, the need for rights-based policies is even more pressing. Countries in the South experience the dual challenge of meeting growing needs with limited resources while securing the right to health and development. It is therefore imperative that we reiterate the link between health and development, as well as the link between health and human rights. Just as much as there can be no development without ensuring health – rights violations – economic, social and cultural – lead to lower health outcomes especially for women and

children. It is also a question of social justice and equity – uneven health outcomes often reflect inequalities in society – with the most vulnerable subject to increased health risks. If the right to a life of health, wellbeing and dignity becomes a privilege, you must agree that something is seriously amiss in our systems. What is even more worrying is that we must continue to make a case for it – to fight to allocate resources for so critical an area of human wellbeing and dignity.

Excellencies,

Another pressing challenge we face today is the impact of climate change on health and wellbeing. Climate change not only affect people directly through exposure to high levels of pollution, displacement as a result of flash floods or the erosion of livelihoods due to sea level rise for example but also undermines health systems by disrupting access to care, straining health workers and infrastructure, and deepening existing inequalities. As we look to the future, we must understand that the health of our planet is intricately tied to the health of its people.

Addressing climate change is not just an environmental issue; it is a health imperative.

The gap in financing for healthcare, especially in the Global South is also concerning. Despite Official Development Assistance (ODA) having increased, aid remains far below the target of 0.7% of gross national income (GNI) and may in fact reduce in time to come. The need for increased financing for Universal Health Coverage, including sexual and reproductive health has never been more urgent. Yet, aid for sexual and reproductive health declined by 11% between 2021 and 2022, and the share of population aid is falling.

Countries in the Global South face the greatest financing needs while facing the strongest constraints on domestic financing. It is crucial that we shift towards public financing and adopt prepayment and risk-pooling models that ensure healthcare is accessible and equitable for all, regardless of income.

Excellencies,

Sri Lanka has long been a champion of Universal Health Coverage. Through decades of strategic investment in public health, our nation has achieved significant milestones.

Sri Lanka has one of the highest life expectancies in the region, with remarkable reductions in maternal and child mortality. Sri Lanka has the lowest neonatal, infant and child mortality rates in South Asia. According to the WHO, Sri Lanka's maternal mortality ratio has declined from 550 per 100,000 live births in the 1950s to 29.5 per 100,000 live births in 2020. More recent data from the Family Health Bureau indicates a further reduction, with the MMR reaching 25 per 100,000 live births in 2024. We have achieved high coverage of antenatal care, institutional deliveries, and childhood immunization. This is thanks to the range of initiatives which ensured access to quality healthcare, including family planning services, antenatal care, skilled birth attendance and postpartum care.

Additionally, Sri Lanka has implemented various initiatives to ensure access to quality healthcare, including family planning services, antenatal care, skilled birth attendance and postpartum care.

Our national immunization programme, recognized as one of the most successful in the world, has contributed to the elimination of several diseases such as polio, neonatal tetanus, measles, and rubella. Many other vaccine-preventable diseases, including Hepatitis B have been successfully controlled.¹ However, we recognize that maintaining these gains is a challenge and requires continuous adaptation and financing. Like many nations, Sri Lanka is facing a growing burden of non-communicable diseases, mental health challenges, and an aging population. We are committed to addressing these concerns through robust policy frameworks, strengthened healthcare infrastructure, and enhanced investments in preventive and curative care. As there are many survivors of chronic debilitating diseases, palliative care has recently been identified as an important community and primary care-based service.

We look for opportunities to share our experience, and to partner with the international community in realizing a future where every individual, regardless of age, gender, sexuality, ethnicity or nationality, has access to the highest standard of healthcare and the opportunity to lead a healthy, fulfilling life.

Excellencies,

As we navigate an increasingly complex global landscape, we must recognize that the right to health, codified in the WHO Constitution and the Universal Declaration of Human Rights, is fundamental to achieving the SDGs and ensuring well-being for all.

But these goals cannot be achieved in isolation. They require global cooperation, evidence-based policy solutions, and sustained investment in health systems. It is up to all of us to ensure that the promise of universal health coverage and the realization of SRHR are not mere ideals, but realities for all.

Let us recommit to this cause with renewed energy and determination.

Thank you.

¹ <https://www.health.gov.lk/news/a-national-immunization-conference-was-held-in-colombo-after-ten-years/>