

MYANMAR

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Statement by His Excellency U Nyan Win

Minister for Foreign Affairs and Chairman of the Delegation of the

Union of Myanmar at the

United Nations General Assembly

High-level Event on Millennium Development Goals

New York

(25-9-2008)

Mr. Chairman,

In the interest of time, allow me to focus on Myanmar's experience on implementation of MDG 2, 4, 5 and 6.

Implementation of MDGs in Myanmar is inextricably linked with implementation of our National Development Plan, which is designed to accelerate growth, achieve equitable and balanced development and to reduce socio-economic gap between rural and urban areas in the country. Under the Plan we have (3) major development programmes in which every aspect of MDG targets are incorporated. They are the Border Area Development Programme, the 24 Special Development Zones Plan, and the Integrated Rural Development Plan. Through the National Development Plan, we are able to achieve significant progress in areas such as poverty alleviation, health, and education. Development of infrastructure and boosting agriculture production and diversification into agro-based industries are the firm foundation on which we consolidate the MDGs.

The Government places high priority on the promotion of education. We strongly believe that it is one of the fundamental requirements for attainment of sustainable development. It is also a prerequisite for achievement of all other MDGs.

Long-term investment in education sector is made with the aim of building human resource development. To this end, the Government expands the number of basic, primary, post-primary, middle and high schools throughout the country providing access to education for all.

Focus is also given to acquiring qualified teachers, teaching materials, upgrading of teaching methodologies and utilization of effective testing and assessment system to enhance not only the quantity but also the quality of education.

Primary education project, post-primary school projects, special programme for over-aged children and non-formal education programmes, to name a few, are undertaken with aims to meet the MDG-2 targets. Primary education projects enable the increase in net enrollment rate from 65.7 per cent in 1990 to 98.1 per cent in 2007. The proportion of pupils starting grade-1 who reached grade-5 increased from 24.5 in 1990 to 71.4 in 2007. Youth (15-24 years old) literacy rate also increased from 80.9 per cent in 1990 to 97.6 per cent in 2007. Both the primary net enrollment rate and the youth literacy rate are estimated to reach 100 per cent by 2015.

In the health sector, the Myanmar National Health Plan forms an integral part of the National Development Plan. The National Health Plan aims to uplift health, fitness and educational standard of the nation; to enhance quality of health care; and to accelerate rural health development activities. The National Health Plan encompasses programmes that are drawn up to meet the MDGs 4, 5 and 6.

The Plan is composed of programmes such as National AIDS Control Programme, National Strategic Plan for Expansion and Upgrading of HIV/AIDS Activities, National Strategic Plan for Scaling Up HIV Prevention and Control, National Malaria Control Programme, National Tuberculosis Programme, Women and Child Health Development Project, promotion of community-based health activities, improvement of environmental health, rural health development scheme, primary health care programme and reproductive health programme.

Due to measures taken to give priority to public health care, Myanmar is now free from diseases such as small pox, leprosy and polio. Under-5 mortality rate is on the descending trend, declining from 130 per 1,000 live births in 1990 to 66.6 per 1,000 live births in 2003. Infant mortality rate also declined from 98 per 1,000 live births in 1990 to 49.7 per 1,000 live births in 2003. By 2015, Myanmar aims to reach 28.3 per 1,000 live births.

Myanmar has taken effective measures to reduce maternal mortality rate. Among other initiatives, we are focusing on increasing the proportion of births attended by skilled health personnel, which has reached 77.8 per cent by 2007.

Regarding HIV/AIDS, Myanmar has not only able to level the infection rate but also has been able to reduce it. The 2008 UNAIDS report estimated that the number of people living with HIV/AIDS declined from 0.9 per cent in 2001 to 0.7 per cent in 2007.

With regard to malaria, we are able to reduce prevalence per 1,000 population from 18.7 in 1992 to 9.6 in 2006. Death rate associated with malaria fell from 11.2 per 100,000 in 1992 to 2.9 in 2006.

Myanmar is expected to meet most of her targets in areas such as health, education, and access to safe drinking water. However, we are cognizant of the fact that many challenges remain.

Each MDG is intrinsically linked to one another. Balanced growth and development is crucial for the achievement of all the MDGs. To hold on to our gains that had been attained we need to be vigilant of the changing demographic, epidemiological, environmental, climatic and economic trends, both nationally and globally. National efforts need to be complemented by cooperative efforts by the international community if all the developing countries are to reach their MDGs.

I thank you.
