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Forty-second session

GENERAL ASSEMBLY

PROVISIONAL VERBATIM RECORD OF THE FORTY-FIFTH MEETING

Held at Headquarters, New York, on Wednesday, 21 October 1987, at 10 a.m.

President:

Mr. FLORIN

(German Democratic Republic)

- Address by Mr. Yoweri Kaguta Museveni, President of the Republic of Uganda

- Report of the Economic and Social Council [12]

(a) Report of the Council [chapter VI (section C)]

- (b) Draft resolution
- (c) Amendments

- Organization of work

- Question of peace, stability and co-operation in South-East Asia [42]

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The meeting was called to order at 10.35 a.m.

ADDRESS BY MR. YOWERI KAGUTA MUSEVENI, PRESIDENT OF THE REPUBLIC OF UGANDA

The PRESIDENT: The Assembly will first hear an address by the President of the Republic of Uganda.

Mr. Yoweri Kaguta Museveni, President of the Republic of Uganda, was escorted into the General Assembly Hall.

The PRESIDENT: On behalf of the General Assembly, I have the honour to welcome to the United Nations the President of the Republic of Uganda, His Excellency Mr. Yoweri Kaguta Museveni, and to invite him to address the Assembly.

<u>President MUSEVENI</u>: The skill with which you have up to now conducted the deliberations of the Assembly, Sir, clearly confirms the wisdom of your election to the high office of President of the forty-second session of the General Assembly. I am confident that under your guidance the session will proceed to meaningful conclusions.

We in Uganda have just marked the twenty-fifth anniversary of our independence, and yet for most of those 25 years our people have suffered greatly at the hands of dictators and murderers. It was to put an end to fascism and all its ramifications that Ugandan patriots organized an armed struggle that brought down Amin in 1979, and Obote and his successors in 1986. In January 1986, the National Resistance Movement and its military wing, the National Resistance Army, pioneered originally by 27 young men, triumphantly removed from State power the agents of dictatorship and fascism. The change we ushered in was, as we have stated before, not a mere change of guards, but a fundamental change. It is the character of this change that I should like to share with the Assembly.

In times of great difficulties, it is true that any generation often considers its problems and hard choices as unprecedented, compared with those that went before. Yet most, if not all of us, would agree that in a profoundly deeper sense our generation truly stands at the crossroads of human history as none other has before. We sit and deliberate here at a time when mankind has acquired unprecedented knowledge that can either unite and save us or destroy this planet.

Those who have scaled the heavens into outer space in our generation have demonstrated quite clearly certain undeniable facts: that we inhabit a common home in space that we call Earth; that our destinies, whether or not we know it or accept it, are indissolubly linked one with the other; that common sense dictates that to survive we need co-operation not confrontation; and that we need mutual assistance, not exploitation of the weak by the strong. The planet Earth, despite the immense diversity of its cultures, ideologies and philosophies, has clearly emerged in our lifetime as a simple biosphere, a unified system of conscious beings. You see that in both small and great things, in beneficial and injurious interaction between nations.

Clearly, the United Nations was founded to give this increasing perception of our common destiny a firm foundation. According to the Charter of the United Nations, the main purpose was

"to save succeeding generations from the scourge of war, which twice in our lifetime has brought untold sorrow to mankind, and to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small".

The great requirement of our time must surely be an honest evaluation of how far the community of nations has advanced or fallen short of realizing these lofty objectives.

How are we entering the twenty-first century? Do we enter it as a planet whose scientific discoveries and spiritual values have provided a common purpose for survival? Or do we enter the next century poised to use our space-age technology to prepare the annihilation of life on our planet?

It is our profound conviction that the survival of mankind, that the fulfilment of our dreams as individuals or nations, must be in direct proportion to the extent to which we adhere to the ideals and values articulated in the United Nations Charter and all other international treaties and declarations.

Notwithstanding our limitations, my country stands tall in the endeavours () uphold the great purpose of this Organization. The Uganda Government, under the National Resistance Movement (NRM), begins first and foremost with an unwavering commitment to the respect of human rights and to the sanctity of human life. We waged a protracted war against tyranny on the platform of restoring personal freedoms and the amelioration of the socio-economic conditions of our people. ' hat is the corner-stone of our political programme.

To give a few impartial indicators of the positive nature of Uganda's viab e return to normalcy, I shall simply refer to the latest report by Amnesty International. It states in part:

"Amnesty International noted a significant improvement in respect for huma rights in Uganda in 1986".

Another reputable observer, the Director for the United States Committee on Refugees, Mr. Roger P. Winter, after an extensive tour of Uganda, wrote a perceptive article in July this year, entitled "The Armies of Uganda and Human Rights". This is what he reported, in part:

"From what I saw, I am convinced that the performance of the National Resistance Army with respect to civilians who are traditional ethnic

antagonists" - that is his own opinion; there are no traditional antagonists in our country - "is qualitatively better than that of the (defunct) Uganda National Liberation Army" - that is the old army that we defeated. "Clearly its general pattern of discipline and relations with civilians is a welcome change from the previous army's performance in the first half of this decade." Perhaps there is no surer indication of a return to normalcy than the degree

to which refugees return to their country. They can only do it when they are genuinely convinced that they will be safe and their property secure. Our record since our Government took power speaks for itself. Available statistics of the United Nations High Commissioner for Refugees (UNHCR), corroborated by those of our Government, show that since January 1986 the rate at which Ugandans have been returning to their homeland has dramatically increased. For example, in a period of 18 months - from January 1986 to July 1987 - 231,261 refugees returned to Uganda. This means a monthly average of 12,555 returnees, a spectacular rise of 362 per cent compared with the monthly average over the 41 previous months, before we came to power - that is to say from July 1982 to December 1985 - whose total returnees numbered only 142,055. From UNHCR statistics, by mid-1987, 20,000 refugees had returned from Kenya, 30,000 from Rwanda, 176,560 from the Sudan and 25,885 from Zaire. And tens of thousands of internally displaced persons have resettled peacefully in their former places of abode.

Despite our unwavering commitment to the observance of human rights, which is popularly defined as the absence of physical molestation, freedoms of speech, movement and ownership of property, the NRM is acutely aware that, for these to be meaningful and capable of realization, a more fundamental commitment to the improvement of our socio-economic conditions is the prime imperative of our times.

A hungry man cannot be said to enjoy a full life; a sick man is an incomplete human being. The fundamental human rights popularly championed by worthy organizations, such as Amnesty International, important though they are, may well be meaningless or irrelevant to the millions who are tortured from birth by hunger and disease. What we want to point out here is that it is impossible to guarantee the human dignity of the people in a state of poverty, disease, ignorance and economic backwardness. In these circumstances, such efforts will be rendered peripheral to the real human rights problems which, as I have said, are based on the consequences of underdevelopment. It is not enough to speak of human rights in the formal sense of freedom of speech, freedom from arrest and that sort of thing. We must also speak of freedom from hunger, freedom from disease, freedom from living under a leaking roof. There is no way that one can speak of just one quarter of the human rights of man and forget about three quarters.

I believe it was with this in mind that, decades ago, the General Assembly promulgated the landmark Universal Declaration of Human Rights. I believe it was because of that realization that the General Assembly further included detailed covenants on socio-economic rights which every individual citizen is entitled to enjoy. We must speak of human rights as a complete unit and not just one part of it. It must be a complete package and must include political rights as well as the right to freedom from want and the right to freedom from hunger. It must be a total package and not just branches of the problem.

It is in this context that the Government of the National Resistance Movement has embarked on a vigorous and realistic programme for national recovery.

The abject poverty in which our people live is juxtaposed with the tremendous riches of Africa. But the statistics of our socio-economic conditions could be as graphic as they are disturbing.

Consider, for instance, that the adult daily calorie requirement is about 2,500. In most of Africa, however, the greater part of the population consumes less than two thirds of this. Malnutrition is rampant. In Uganda, a country that is tremendously fertile and blessed with a favourable climate, the prevalence of malnutrition still runs at 20 to 30 per cent and even higher in some places. In June 1987, the crude death rate was recorded at 18 persons per 1,000; maternal mortality at 5 persons per 1,000 and neo-natal mortality at 47 persons per 1,000. The infant mortality rate was a staggering 108 persons per 1,000. By comparison, most developed countries have infant mortality rates of less than 20, compared to Uganda's of 108 children in every 1,000. In Sweden I believe the rate is 7 children in every 1,000, compared to our 108, as I have said.

At the time when we took power, in 1986, 12 per cent of all children born in 1985 died before reaching their first birthday and by projection 25 per cent would have died before they were 15 years old. While the fact of these deaths is a tragedy, the folly of it all lies in the fact that this high infant mortality and morbidity are largely attributable to diseases which are vaccine-preventable. Measles and its complications, such as diarrhea and respiratory infections were responsible for 56 per cent of the deaths in 1982 and 34.5 per cent of the deaths in 1984 and are still the major cause of death among the under-five age group. Other preventable diseases, such as whooping cough and tuberculosis were on the increase before we took power. We have countered them with a vigorous and accelerated programme of immunization whose coverage is now over 56 per cent of the target group and a little less in the rural areas; but we are determined to reach a 100 per cent coverage in the shortest time possible.

Life expectancy in Uganda is 55 years and, although it may be an improvement on the 1980 record low of 53 years, it is certainly a very poor rating against, Bay, a country like the United States of America, where the corresponding figure is 74 years. This is further compounded by the present doctor-population ratio of 1:31,000 in Uganda - in other African countries it may be even higher - and a literacy rate of only 65 per cent and 45 per cent for male and female respectively, while the corresponding rate in France is 100 per cent literacy for both male and female. Our income per capita, which has been declining at a rate of 2.9 per cent per annum over the past 15 years, is now among the lowest in the world. This state of affairs underscores the state of our backwardness and underdevelopment, which is characteristic of many other developing countries in the third world.

By and large, most of our countries have economic structures whose asymmetrical development inherently ensures perpetual underdevelopment and a net outflow of resources to the outside world. I am referring to a backward

subsistence sector based on agriculture side by side with a stunted modern sector which is merely an enclave in the former. There is usually no healthy linkage between the sometimes ultra-modern import-export sector on the one hand and the backward subsistence sector on the other. Whatever linkage there may be is parasitic in favour of the modern enclave sector. For instance, labourers employed in mines receive wages that cannot sustain their families and permit their retirement. They go back to scratch a living from the land without the benefit of modern technology. They cannot count on receiving pensions to take care of them during their old age. Often the rural population produces coffee or cotton which are sold by the national elite to foreign countries. The foreign exchange proceeds from these commodities are then used to buy whisky, perfumes and video machines, and nothing goes back to the primary producers. Hence the parasitism of one sector vis-à-vis the other that we are talking about. There is disequilibrium not only between the so-called modern sector and the rest of the economy but also between agriculture and industry. There are no inter-sectoral linkages. The semi-modernized sectors are linked with the economies of the advanced countries, especially those of the Western countries, and do not enjoy any internal cohesion. In most cases those countries with tourist industries, for example, cannot service them on their own. For instance, the cornflakes, the jam, the cheese, the wines and so forth to feed the tourists all come from outside the third-world countries, while the so-called factories are mere assembly plants.

This problem of the net outflow of resources is not a new problem. We remember the slave trade, in which very healthy human beings were extracted from their communities and taken to the Americas and to the Caribbean to produce commodities cheaply for America and Western Europe in exchange for mirrors, beads and trinkets. This constituted a big haemorrhage of the African societies, and it

is still going on. The process of unequal exchange continues relentlessy and could become worse unless there is a radical change to halt it. If we continue to exchange value for no value, copper for wigs, coffee for perfumes, cotton for luxurious cars and so on, the gap between the advanced countries and the developing countries will definitely continue to widen.

There are many distortions concerning the situation in Africa, including Uganda, not least in the ideological sphere. When we were fighting the corrupt, brutal dictatorships of Amin and Obote there was much speculation about our ideological orientation. The question was often raised would we be pro-West or pro-East. In my view, this type of labelling is an insult to the African people. It presupposes that the African people have no legitimate interests of their own and that their only role is to support the interests of either the Western or the Eastern bloc of countries. This type of attitude and tendency is erroneous, misleading and simply unfortunate. We reject it entirely. Even the simplest forms of animal life, such as amoebas, hydras or earthworms, know their interests. They know how to obtain the food that is appropriate for their living; they run away from danger when they see it; and they know friends from foes. These are not human beings but the simplest of animal life. Why should Africans not know their interests and what is good for them? Why must we only know what is good for us through the East or the West? Our movement rejects this type of thinking.

As I informed the Assembly earlier on when we came to power last year we found that 96,000 of our children were dying every year from six preventable diseases: measles, diphtheria, tetanus, polio, whooping cough and tuberculosis. This figure of 96,000 fatalities did not include those dying from other such mass killers as malaria and gastro-enteritis. But did we need Americans or Russians to tell us that it is simply not acceptable to allow 96,000 children to die from diseases

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(President Museveni)

which can be prevented by vaccines? And why should our programme for changing this sad state of affairs be seen in terms of the East-West conflict? We have our own interests also.

Point 10 of our political programme prescribes an economic strategy of a mixed economy. We must stress that this programme is neither pro-this nor pro-that; it is pro-Uganda. We have our own interests and we do not have to be pro-anybody. We reject dogmatism, over-simplification, theoretical vulgarization and graft. We take from every system what is best for us and we reject what is not good for us. We do not judge the economic programmes of other nations, as we believe that each nation knows best how to address the needs of its people. Let us hope that, although we are a small country, no nation will presume to know what is best for our economy and for our people. We have our own legitimate interests. We shall judge friend and foe according to how they relate to our own interests.

I have been talking about the background to our struggle and indeed the background to the socio-economic scene as we found it. I am pleased to report that since we took the reins of power, we have not lost a moment in implementing our radical programme of transforming the pathetic situation that had obtained in our country. We are repairing and reorienting the factories to ensure that they have more elements of locally-added value in their manufactures. We are repairing the roads and the public utilities. We are importing vehicles for public transport and equipment for agriculture. We are glad some of the international financial institutions have agreed to co-operate with us in this task. After this programme of minimum recovery is accomplished, we will expand and diversify agricultural production, build new processing plants, increase power output, and so on, in order to ensure that we transform the lives of our people. We shall have to do all this.

Crucial to this process is technology transfer. Inferiority in technology was responsible for the colonization of the African continent. We should never have been colonized had we not been inferior in technology.

There is no way we can maintain our independence in politics unless we create a technological base of our own. This work is difficult, but at the same time it is easy. It is difficult because our people have got used to a slave mentality of impotence and dependence: at the time we took over, even the pins used to fix papers on boards were coming from outside. But, looking at it from another angle, in my opinion this work is not so formidable, because we are not doing the pioneering work that those who preceded us in industrialization had to do. Provided we frugally, cleverly and creatively husband and utilize our resources, we can purchase that technology from partners abroad. As we have embarked on a programme of import-substitution, which we shall deepen by increasing the local

value-added content by making full use of our natural resources, and, later on, of our manufacturing capacity, we shall be able to solve this problem.

Our potential in this regard is not inconsiderable. Of course, import-substitution or any other form of manufacturing must be based on utilities such as electricity, water, telecommunications and infrastructure, all of which we are vigorously rehabilitating.

Simultaneous with that rehabilitation, we are also embarking on increasing agricultural production for domestic consumption and export. More particularly, we are rehabilitating traditional exports such as copper, cotton, tobacco, tea and coffee as well as embarking on producing for export other crops which have traditionally been produced only for local consumption. Here I am talking of maize, beans, sorghum, sunflowers, sim sim, soya beans, and so on. We are also rehabilitating the beef, dairy and leather industries, as well as the fishery and wood industries. That will give us a wider raw-material base and enable us to earn more from exports.

Having accomplished our import-substitution industrial programme, having repaired the infrastructure, and having expanded and repaired agriculture, we shall invade the area of engineering so that we can begin to make some of the essential spare parts for our machinery. Gradually, we shall acquire the capacity to produce tool- and machine-making equipment. That is all part of our programme to build an independent, integrated and self-sustaining national economy, and is point number five in our political programme.

This effort will be greatly assisted by a process of regional integration so that we can amalgamate the fragmented markets of eastern, central and southern Africa into one market that can sustain big industries. I am glad efforts are already being made under the arrangements of the preferential trade area of 15 countries.

From the foregoing, one can discern the following. First, I have dwelt at great length on economic issues. That is because I believe there is no way in which third-world countries can sustain their growth, liberate their peoples from poverty and maintain their independence without resolving the question of the better performance of their economies. Beggars are never choosers. There is no way we can be perpetual beggars and at the same time maintain our independence. Moreover, we do not have to be beggars because we have resources with which, if frugally managed, we shall be able to attain development.

Secondly, I have also pointed out that we have a radical programme - and there is no doubt that our programme is radical - of economic transformation. We make no apologies for that. Our people are entitled to a good life. This radical programme, however, is not aimed at any other country or at anybody else. It is aimed at our own problems. It is aimed at Uganda. Our people must enjoy the bounty of their country. Therefore, there is no reason for anybody to be jittery about our radical programme, unless of course he has illegitimate interests he is pushing in Uganda. Anybody with legitimate interests he is pushing in Uganda has no reason to be worried about our programme, which obviously is radical because we want to change the conditions of our people. We make no apology for that.

At the level of international affairs, we support the three great causes: first, the liberation of man from domination by nature. The people of the third world must be able to tame and harness nature for their own good. Secondly, we support the liberation of man from oppression by other men. Thirdly, we also support the liberation of peoples, nations and countries from domination by other peoples, nations or countries. We regard these as the three great causes.

In the southern part of our continent, there is still an arrogant, racist group that is oppressing our people in South Africa in a manner that is without

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(President Museveni)

parallel in the history of man. Our people in South Africa are, however, waging a valiant struggle and, the arrogance of the racists notwithstanding, our people will win in the not-too-distant future. Throughout history oppressors have always been overestimated until the hour of reckoning. That is a tragedy of history. The South African régime is narrow-minded, aggressive, arrogant, disdainful of the African and of world opinion, and it thinks it can hold back the march of history by subversion against Africa, aggression against Angola and repression within South Africa itself. Who has ever succeeded in this task of holding back the forward march of history? How many repressive régimes that had greater power has history witnessed collapsing?

Therefore, neither the African people nor the whole world need be pessimistic or cowed. There is a lot of power in Africa that could be harnessed, to the great disadvantage of the handful of racists in the southern half of our continent. The sooner the racists recognize this, the better for them and for southern Africa as a whole.

With regard to international co-operation, our view is that the Western countries, in particular, have a moral obligation to help the third world economically because in the past they expropriated many resources from Africa, Asia and Latin America in the form of slaves, minerals and raw materials and for many centuries or decades usurped the sovereignty of our countries. That meant that decisions in these countries were being made according to the wishes of foreigners and many times that meant to the detriment of the indigenous peoples.

Therefore, the Western countries, out of morality ought to compensate for this transfer of resources from the present-day third-world countries to themselves. That is a moral obligation. The third-world countries, however, should not make foreign aid the strategy for their development. Instead, they should insist on fair and balanced trading arrangements whereby they purchase machinery, implements and technology in a manner that is easily affordable by them. We in Uganda do not emphasize aid. Aid is limited; it is merely a token. We are more interested in fixing mutually advantageous trading arrangements with high- and medium-technology countries so that we can transform our economy into one that is independent, integrated and able to sustain itself.

Allow me to say how pleased I am to note that one of the issues being addressed by the Assembly is the problem of the disease acquired immune deficiency syndrome (AIDS). We in Uganda recognize AIDS as a potentially serious public health problem. We also recognize it as a global problem. In our own case the disease was first identified in 1982. By the beginning of 1987, about 1,138 cases had been reported. We have approached the problem with openness and honesty, which has unfortunately been equated with an exaggerated preponderance of the disease in the country and fuelled by exaggerated publicity in the international press. However, we shall continue to be open about it because we know that AIDS can be prevented, and it is only through a vigorous programme of public education that we can hope to contain its spread. We consider debates about its origins diversionary and the racial imputations of its origins very unfortunate; these imputations are scientifically unproved and can only serve to postpone its total eradication. I wish to place on record our appreciation for the work done so far by the World Health Organization and to appeal for greater global concerted efforts on this problem.

In conclusion, I affirm our commitment to the noble ideals of this Organization in the full knowledge that the whole can only have a guality that reflects the attributes of its parts. If physicians can tell the fate of a patient merely by observing a few out of the billion cells of a body, and if we accept that the building blocks of the awesome physical universe in which we live are particles of matter too small to be seen with the naked eye, we must surely realize that the fate of our community of nations could be accurately measured by what happens to Uganda and the numerous small Uganda-like third-world countries.

The PRESIDENT: On behalf of the General Assembly, I wish to thank the President of the Republic of Uganda for the important statement he has just made.

Mr. Yoweri Kaguta Museveni, President of the Republic of Uganda, was escorted from the General Assembly Hall.

AGENDA ITEM 12 (continued)

REPORT OF THE ECONOMIC AND SOCIAL COUNCIL

(a) REPORT OF THE COUNCIL (Chapter VI, section C) (A/42/3)

(i) DRAFT RESOLUTION A/42/L.7

(ii) AMENDMENTS (A/42/L.9)

<u>The PRESIDENT</u> (interpretation from Russian): I draw the attention of the Assembly to the amendments to draft resolution A/42/L.7, which have been issued as document A/42/L.9.

<u>Count YORK von WARTENBURG</u> (Federal Republic of Germany): The Ambassador of Denmark spoke yesterday on behalf of the 12 member States of the European Community. I wish to add a few remarks concerning my Government's support for the draft resolution before the Assembly, of which we are happy to be a sponsor, and also some remarks with regard to our general approach to the AIDS problem on both the national and the international level.

My Government whole-heartedly supports the draft resolution before the Assembly (A/42/L.7), which aims at facilitating co-ordination in the international community's fight against AIDS. This disease is one of the world's most pressing health problems. Combating it requires every effort on the one hand to prevent infection of those who are free from the disease and on the other and at the same time to care for those who have become victims of the pandemic. I wish to emphasize strongly what the Secretary-General said yesterday. Here is a problem which calls for intense and close international co-operation to the fullest extent. AIDS is a phenomenon which is a threat to all our populations. Like the misuse of drugs, and like the effects of atomic radiation disasters, the disease does not recognize borders. We must fight it together. The commonality factor is called for.

(Count York von Wartenburg, Federal Republic of Germany)

My Government has initiated a range of measures designed to contain and combat AIDS at the national level. Since so far there is neither a vaccine nor any truly effective medication against AIDS, those measures include, among others, the promotion of research and the promotion of the international exchange of scientific information, which in my country is channelled through the World Health Organization (WHO) AIDS Co-operation Centre. We have also, of course, taken measures to carry out an information campaign reaching out to the population at large and to specific major-risk groups in particular; for the assignment of special AIDS experts to public health officers; for the improvement of the epidemiological data situation through mandatory - and I stress that - but anonymous reporting by laboratories; and for the improvement of the medical, nursing and psycho-social therapy and care for AIDS victims and persons infected with the human immuno-deficiency virus (HIV).

As part of the bilateral co-operation of the Federal Republic of Germany with countries particularly affected by the disease, assistance projects aimed at combating AIDS are given priority support. Such projects focus in particular on the following: epidemiological research as the basis for preventive measures; the training of medical personnel; support for information campaigns; the development of appropriate methods of diagnosing AIDS and of testing blood-bank supplies; and the improvement of the general medical infrastructure in areas threatened by AIDS.

In the draft resolution which the Assembly is discussing today the leading role of the World Health Organization in combating AIDS has rightly been emphasized. My Government fully supports this approach. At the Venice economic summit meeting on 9 June this year Federal Chancellor Helmut Kohl stated that at

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(Count York von Wartenburg, Federal Republic of Germany)

the international level WHO was the forum best suited for co-ordinating world-wide efforts to combat AIDS. I wish to express to the Director-General of the World Health Organization our appreciation of his efforts in this field and also to thank him and his collaborators for the excellent presentation by which he briefed the Assembly yesterday. Within the limits of its resources WHO does everything possible to provide personnel and material support. The renewed recognition of leading role that WHO plays in this field will, we hope, help to avoid duplication as far as possible.

The draft resolution furthermore expressly endorses the WHO strategy as contained in resolution WHA 40.26, which was adopted by the fortieth session of the World Health Assembly in Geneva last May. The delegation of the Federal Republic of Germany to the World Health Assembly whole-heartedly endorsed that resolution, and we are happy to say that the public health policy pursued by my Government is fully in line with it.

I would make one more point. In fighting AIDS it is of crucial importance to see to it that the measures taken are not only effective in combating the disease but also and at the same time in line with the principles of human rights.

I mentioned that in the Federal Republic of Germany a WHO AIDS Co-operation Centre had been established. Let me, in conclusion, state that the Federal Republic of Germany is prepared to continue and further develop, especially through that Centre, the existing excellent co-operation with the World Health Organization and equally with all interested countries on the basis of the WHO Special Programme on AIDS.

<u>Mr. ENDREFFY</u> (Hungary): The socialist countries for which I have the honour to speak - namely, the People's Republic of Bulgaria, the Byelorussian Soviet Socialist Republic, the Czechoslovak Socialist Republic, the German Democratic Republic, the Hungarian People's Republic, the Mongolian People's Republic, the Polish People's Republic, the Ukrainian Soviet Socialist Republic and the Union of Soviet Socialist Republics - are fully aware of the fact that the AIDS pandemic presents an international health problem of extraordinary scope and unprecedented urgency. The world-wide epidemic of this disease threatens not only individual countries or regions, but all mankind. Its implications in terms of human suffering, costs of health services and social impact are devastating.

Appreciating the efforts of the World Health Organization (WHO) to combat AIDS, in view of its global dimension, scope and complexity as well as its political, economic and social implications, we join the call for the strengthening of co-operation among all sectors of the international community in order to enable WHO to continue to perform its function of directing and co-ordinating the urgent and resolute global struggle against AIDS.

A global problem of such magnitude demands a global response. The world-wide emergency created by AIDS requires urgent and vigorous action at the national, regional and global levels to develop epidemiological surveillance and to intensify research on prevention, control, diagnosis and treatment, including social-science research, training of national health-workers and other related areas of prevention, control and research. It is essential, in our view, that business interests should not be the primary motivation in this endeavour.

The countries I am speaking for are committed to global AIDS prevention and control. AIDS is being combated intensively in our respective countries, in accordance with the recommendation of WHO. As an essential contribution to the

(Mr. Endreffy, Hungary)

international effort, our countries are ready to share and disseminate the experience they have gained in this field.

Since it is a fact that AIDS threatens entire societies rather than segments thereof, national and international programmes for and institutional systems of prevention, control and treatment should be non-discriminatory in character and be accessible to all, regardless of social status. Our respective countries deem it necessary to ensure that the global strategy for AIDS control is effectively 'implemented at all levels - national, regional and global - with the involvement of the United Nations and its Secretary-General in the co-ordination of action, for the purpose of containing, progressively reducing and eventually stopping the spread of this infection. We stand ready to consider and support any reasonable proposal aimed at the prevention, control and final elimination of this epidemic from the life of future generations.

Consequently, the countries on whose behalf I have spoken will whole-heartedly support the contents of the draft resolution that was introduced by the representative of Australia.

<u>Mr. FERM</u> (Sweden): On behalf of the five Nordic countries - Denmark, Finland, Iceland, Norway and Sweden - I should like to address myself to the issue of one of the most severe health risks of this century: acquired immune deficiency syndrome, or AIDS.

The world is now facing an AIDS pandemic which affects both developed and developing countries. It has severe consequences not only for public health but also for social and economic development. But, above all, each individual AIDS case is a human tragedy. The AIDS disease is present in all continents of the world and has to be dealt with as a global problem. It is obvious that a concerted international effort is urgently needed if we are to achieve significant results in

(Mr. Ferm, Sweden)

the fight against AIDS. The fact that we are today addressing the issue in the plenary Assembly is in itself encouraging.

The Nordic countries commend the World Health Organization for its swift and fficient response to this new global health problem. Without delay, the rganization pooled its resources of knowledge, skill and dedication to set up a pecial Programme on AIDS. But we regret that financial constraints have forced it o rely on voluntary contributions to implement the Special Programme on AIDS.

The Nordic countries fully support the outline for the work of the World ealth Organization to combat AIDS and have up till now contributed over US 17 million of the total of some \$44 million pledged to the Programme. In ddition to that, our bilateral assistance related to AIDS is being undertaken in :lose co-operation with the World Health Organization. There is a strong need for : common strategy and internationally agreed recommendations for practical action as well as for technical assistance in order to develop national action programmes For the prevention and control of AIDS.

This is a question not only of scientific endeavour but also of moral leadership. In taking measures to combat the spread of AIDS, we must draw on all the solidarity, the humanism and the respect for human rights that we are capable of. We must resist all tendencies at stigmatization of groups, discrimination, social isolation and nostility towards infected fellow human beings.

I should now like to address myself to some specific issues where international co-operation is necessary and to state, in that context, that for various reasons the Nordic countries do not find mandatory testing for human immunodeficiency virus (HIV), either within or between countries, an efficient means in the fight to curb the spread of HIV infection. We fear that such measures might be of little real significance in the fight against AIDS, and that they would

(Mr. Ferm, Sweden)

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instead work against the free international movements which we consider so important. In our opinion, providing information about the risks of HIV transmission is a better way to counteract the spread of the disease. Large-scale information campaigns directed to the general public have to be launched, and, at the same time, information should be directed to different groups of people at risk.

While the work of the World Health Organization is of eminent importance, it must be recognized that AIDS cannot be dealt with solely as a health issue. It is a problem which affects all of society and which consequently reaches far beyond the health sector. The AIDS crisis, as a matter of fact, calls for economic and social measures and a strong political will. Some examples will make this clear:

The fight against illicit drugs must be intensified. If we could curb drug addiction, that would significantly reduce one way of transmitting HIV infection that is, through contaminated injection needles.

Prostitution is another cause of the spread of the disease, which calls for greater attention and stronger counter-measures.

The protection of children must be enhanced. The disease will leave even more children in the world without parents or other family providers.

A large number of 20 to 40 year olds will die. In addition to human suffering, this will have serious demographic and economic consequences for many countries. The fight against AIDS will thus require enormous resources.

(Mr. Ferm, Sweden)

A large number of developing countries affected by AIDS are at the same time engaged in a struggle against economic recession. The debt crisis, for instance, and the ensuing adjustment process have already imposed great constraints on the social expenditures of these countries. The health sector is likely to suffer in emergency budgets, in spite of the growing AIDS problem. We also consider that the goal of the international community should be not only to create a strategy but also to assist in the planning and carrying out of national action programmes. This makes the need for concerted international action even more urgent.

Finally, we have a collective responsibility in the fight against AIDS. The disease knows no geographical boundaries and thus has to be fought by co-ordinated action. Hence the whole United Nations system - and within it specifically the World Health Organization - must be mobilized in the struggle against AIDS. As Member States we must live up to this responsibility through generosity in our financial contributions, through determination in our political will and through international unity in the face of this human disaster.

Mr. KIKUCHI (Japan): At the outset, I should like to thank the Secretary-General, Mr. Perez de Cuellar, as well as Dr. Halfdan Mahler, Director-General of the World Health Organization, and Dr. Jonathan Mann, Director of the WHO Special Programme on AIDS, for their very informative introductory Statements and to wish them every success as they discharge their important new duties.

My delegation would like to make a few remarks on item 12.

Acquired immuno-deficiency syndrome (AIDS) is a grave threat, arousing concern among people all over the world. The cause of this disease is not yet fully known, and consequently there is no adequate means of treating it. AIDS, which appears to

be fatal in every case, could have serious social or even political impact within and across national borders.

As of yesterday, a total of 62,438 AIDS cases had been reported to the World Health Organization by 126 countries all over the world. Although so far the number of patients is limited, it is clear that this dreaded disease is spreading world-wide.

My delegation wishes to stress that AIDS respects no national or geographical boundaries; it is a global issue that the international community must tackle, availing itself of all the intellectual, scientific and medical resources at its disposal. We believe that it will be possible to control the spread of AIDS if we take prompt and appropriate measures before the problem truly explodes.

My delegation reiterates that the fight against AIDS must begin right now, by the entire international community, including the United Nations system. In order to maximize the effectiveness of this effort, measures should be developed to cope with the disease at various levels and in a concerted manner.

In this regard, my delegation believes that the role of the World Health Organization (WHO), through its Special Programme on AIDS and its global strategy in directing and co-ordinating the global battle to prevent and control this frightening epidemic, is absolutely crucial. By maximizing the use of all existing mechanisms, WHO must also make every possible effort to promote the exchange of information and research, education and public information on this terrible disease.

My delegation is pleased to note that the United Nations system has initiated a action in support of the AIDS-related WHO programmes. My delegation would strongly urge that all appropriate organizations, both governmental and non-governmental, join in the global struggle against AIDS in co-operation with WHO.

Japan welcomed the establishment of regional and national programmes in the past year to combat AIDS around the world, which we believe will be most useful in promoting measures taken by WHO. In this connection, my delegation wishes to draw the attention of Member States to the Joint Conference on an Integrated Strategy for the Control of AIDS and other Human Retroviral Infections and Hepatitis B, which was held in Tokyo at the beginning of this month under the joint auspices of the Government of Japan and WHO for the purpose of sharing the new technology Japan has developed, and also its experience.

Japan found the Conference most useful, especially in implementing those national and regional programmes already in place. In particular, Japan has conducted considerable research and gained substantial experience in efforts to control hepatitis B, which is endemic in Asia, and adult T-cell leukaemia, which is also prevalent in several Asian countries. I believe that experience such as ours will contribute to developing ways and means to control this pandemic disease.

In January 1988, the World Summit Meeting of Ministers of Health on Programmes for AIDS Prevention will be held in London, and we believe this will provide great impetus to the international community in its struggle against AIDS.

In Japan, too, AIDS is perceived as a serious international health threat, although the number of cases reported there so far is still under 50.

Establishment of effective and comprehensive measures for the prevention and control of AIDS is a most urgent task in all countries. For this reason, my Government decided last February to establish the Ministerial Committee on AIDS Problems to ensure close communication and co-ordination among the Government agencies concerned and to promote various measures to combat the disease. At its first meeting, the Committee adopted a National Plan for AIDS Control, which identified the following five major areas in which measures will be taken.

First, dissemination of accurate knowledge on AIDS; secondly, strengthening the surveillance system; thirdly, strengthening of primary and secondary preventic measures and of counselling services; fourthly, promotion of international co-operation in research; and, lastly, making appropriate legislative arrangements

It is essential in the prevention of AIDS that people be provided with the necessary information from both governmental and non-governmental sources and through all available channels in order to minimize the risk of infection. It is also necessary to take all possible measures to prevent secondary infection, such as tracing those persons with whom AIDS patients have had contact.

Furthermore, Member States must co-operate in and work to improve international measures to prevent and control AIDS. In addition, basic and clinical research by laboratories and universities must be encouraged at domestic and international levels.

In the light of the urgency of the question and the great concern of the international community over AIDS, Japan has joined in sponsoring the draft resolution on AIDS which was introduced by the representative of Australia at the beginning of this meeting.

In conclusion, my delegation would like to reaffirm that Japan stands ready to help strengthen efforts by the international community to eradicate AIDS at the earliest possible date. To this end, Japan is considering making voluntary contributions to the activities of WHO in this vitally important area.

<u>Mr. KABANDA</u> (Rwanda) (interpretation from French): The General Assembly is dealing today with one of the problems that is of primary concern to the world community, from Government leaders to the inhabitants of the remotest villages. It is a question no longer of knowing whether acquired immune deficiency syndrome (AIDS) exists or whether it is as dangerous as people say, but rather of trying to discover the true nature of the disease, its causes, its modes of propagation, its effects and its treatment, and of stopping it. The purpose of this debate, in the opinion of the delegation of Rwanda, is to draw the attention of the international community to the gravity of the danger and appeal to all to unite to fight it.

According to official reports and press information, more than 120 countries are affected by this unprecedented misfortune, and it is said that certain regions are more affected than others. Everywhere the alarm has sounded. The issue is th object of countless debates between scientists and research workers, but also amon political leaders.

Among the many types of reaction with respect to AIDS, we note in particular the reaction of people who, while convinced of its existence, seek some reassuranc by minimizing its effects. In such cases, the necessary efforts are not made to protect themselves or the society. Such a defeatist attitude is rather dangerous. The number of those who refuse to recognize the existence or the pernacious nature of the disease do not prevent its existence or its being what it actually is.

There is also the attitude of those who tend to exaggerate its impact and ev n to give AIDS a political connotation - an attitude that is, regrettably, widespread, and dangerous for many reasons. Apart from the risk of adversely affecting the interests of certain countries, it can also, without justification, create a bad conscience among certain social sectors and undermine the morale of afflicted persons, who must not be treated as outcasts.

Finally, there is the attitude of those who, while recognizing the destructive and deadly nature of the AIDS virus, seek the most appropriate treatment for its victims and ways and means of halting the spread of the disease. That attitude, which is shared by many of our Governments, deserves to be supported and encouraged.

Given the speed with which the disease is spreading all over the world, it is a question no longer of seeking to attribute its origin to certain countries, regions or social minorities, but rather of uniting in our search for means of controlling it. Co-operation among Governments, scientists and agents of medica and social action is indispensable if we are to eliminate this scourge at the

national, subregional, regional and world levels. In other words, the struggle must be continuing and general, though waged with calm and discernment, if we are to arrive at just and appropriate solutions.

I am in no way a scientist, and certainly not an expert on AIDS. However, I have the impression that in so sensitive an area as man's physical, social and moral health, not all working hypotheses are necessarily good or worthy of encouragement. Thus, the Assembly will understand how dangerous it would be, with regard to the geographical origin of AIDS or its main breeding ground, to single out certain regions, countries or social sectors, and, above all, to apply techniques or products whose effectiveness had not been scientifically or clinically proved.

With regard to AIDS, as in all areas relating to public health, we must of course rely on human wisdom, but also on the vigilance of Governments and the World Health Organization to which I pay a tribute for its preventive action and its efforts to increase public awareness and control the disease.

It would appear that at the present stage the best thing to do is to keep the public informed and alert it to the situation. That information must reach everyone since, given the nature of the syndrome, all categories of the world community are in practice vulnerable.

The Government of Rwanda does not seek to minimize, much less conceal, the evils of AIDS. The disease exists. It is real. But it must be eliminated through the combined efforts of all, for the health of our peoples is at stake.

Incidentally, this is what was said recently with respect to AIDS by our Head of State, His Excellency President Juvenal Habyarimana, at a meeting with officials of the Central Government:

"Not being an expert on this disease, but nevertheless sufficiently well informed of its potentially deadly nature, I am duty-bound to draw the attention of those responsible for public health on the moral and technical responsibilities incumbent upon them in respect of public health.

"A false sense of modesty should not prevent them from doing their work. That work consists, first of all, in placing at the disposal of the public Objective and sober, but widely disseminated, information on the kind of disease this is, on the dangers of catching it and on the effective means of protecting ourselves against it. This is the best way to meet the challenge, as well as the expectations of the population, above all of women and mothers who, worried about their children and concerned for themselves, have the right to know, the right to demand that they be given the means of fighting against that disease which, unless we are careful, can become a new scourge or plague.

"Next, a vast project is needed to encourage research and the publication of scientific findings so that the disease becomes better known and that research will help in finding solutions and treatments in the best interests of our country and those of all countries in the region ... and of the international community.

"This will be our contribution to the solution of a problem which is of concern to health authorities throughout the world. We owe it to our tradition and to our dignity."

In Rwanda, a national programme to combat AIDS, which falls squarely within the global strategy defined and adopted by the World Health Organization, is

under way. On behalf of the Government and the people of Rwanda I should like to take this opportunity to pay a sincere tribute to friendly countries and to intergovernmental and non-governmental organizations for the invaluable material, technical and financial contributions they are making to the National Commission on Aids, which operates under the supervision of the Ministry of Public Health and Social Affairs.

The debate that began yesterday on the question of AIDS will have proved to be beneficial in many respects. It will have enabled the General Assembly to assess the scope of this unprecedented scourge in the medical history of mankind; it will have made it possible to arrive at the conclusion that it is necessary to pursue investigative work on AIDS in research centres and elsewhere, and also to undertake resolute and comprehensive action at the State level. In this area, the authorized technical co-ordinating role falls to the World Health Organization, to which we once again renew our appreciation and extend our good wishes for success.

AIDS has been added to a number of other diseases which have claimed and are still claiming victims in the third world, especially in Africa. We hope that the fight against measles, malaria, polio myelitis, diphtheria, tetanus and tuberculosis, among other endemic diseases, will not lose momentum either now or in the coming years. Here, too, we are counting on the active solidarity of the international community, especially action by the World Health Organization.

<u>Mr. ST.-PHARD</u> (Haiti) (interpretation from French): Mr. President, since this is the first time my delegation has spoken at this session in plenary meeting, I should like to take this opportunity to extend heartfelt congratulations on your election to this highly responsible post of our Organization. We also wish to assure you of our support for your commendable efforts and those of your colleagues in the Bureau, to whom we also extend good wishes.

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(Mr. St.-Phard, Haiti)

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Previous speakers have gone into detail about many crucial aspects of the AIDS scourge, which authorities on the subject agree is of alarming proportions and has reached pandemic dimensions. We in the United Nations must meet the challenge inherent in our status as the last bastion against the superstitions and in-bred. prejudices which still persist so abundantly within the collective subconscious. Some societies, in other respects advanced, are increasingly manifesting attitudes. and behaviour which are in psychoanalytical terms clearly regressive, just like the ancients who used to nunt down and kill the victims of certain diseases. Need I recall here the prescriptions and proscriptions of Leviticus with regard to so-called leprosy of biblical times, before the conquest of Canaan? Or the grim fate reserved for those stricken by "the sacred disease", even in the last and extremely painful phase of the status epilepticus? Or the barbarous treatment meted out to the victims of the "grand hysteria" of Jean-Martin Charcot? That barbarity is still remembered by those of us who find these "Salem witch hunts" curiously reminiscent of the fanaticism recently shown by certain pseudo-scientists who included the fact of being Haitian among the risk factors for AIDS, thus exploiting the latent trends of a certain Zeitgeist. Is this scientism perhaps or subconscious racism on the part of certain Western researchers? One can only wonder.

To the charlatan, the head of a well-known centre, who so unfairly sullied the good name of Haiti, this is what we have to say, in the words of a great Hellenist:

"You have done much harm to otners."

As to his name, I shall choose to keep it silent, for self-evident reasons.

(Mr. St.-Phard, Haiti)

(continued in French)

In any case recent data shedding light on the etiopathogenesis of the disease should have dissipated the welter of ignorance and bad faith. However, enlightened sympathy leads me to say: "non solum obliviscor injuriarum, sed etiam memini beneficiarum", that is, not only do I forget the ills done to our country but I also recall the benefits to come. It is wise to recall that certain prejudices die hard and yield to verifiable facts only with difficulty.

At the ministry of Mrs. Barzac, Ministry of Health in France, I came across a proposal by Doctors of the World for a possible universal declaration of the rights of AIDS victims. This apparently forms part of the records of a symposium held in Paris. I wish to include some elements of it in this statement, even if I do so in an impromptu manner. The 10 imperative rules in the text are as follows.

First, in medicine and in law, AIDS is a disease, like any other.

Second, those infected by the virus come under the protection of common law. No exceptions can be made to this.

Third, the health care provided for those infected should be given without any restriction whatsoever, in accordance with the laws of the country.

Fourth, no one is entitled to restrict the freedom or rights of persons infected by the virus, no matter what their race, nationality, sex or religion.

Fifth, any reference to this disease, present or future, without the consent of the person infected by the virus must be regarded as wrong and punished under applicable laws.

Sixth, any action with discriminatory motives that would have the effect of denying those infected by the virus employment, housing or insurance or of restricting their participation in collective activities, such as in school or in the army, should be punished.

(Mr. St.-Phard, Haiti)

Seventh, blood transfusions, blood-taking and injections should as far as possible be guaranteed to be harmless.

Eighth, in no case shall procedures to trace a virus be undertaken without the knowledge of the person concerned.

Ninth, all examinations deemed necessary to trace the disease must be carried out with respect for anonymity and confidentiality.

Tenth, the medical confidentiality between doctors and between doctor and patient must be strictly preserved, especially with regard to those who work in public service. There should be no exceptions to this rule, whatever the exigencies of modern medical technologies. The data collected by doctors should serve only medical purposes. Any departure from this moral code should be punished.

This is not necessarily the official position of the Government of France or that of the Republic of Haiti, but I propose this as a text to be considered by delegations and in particular by the group of Dr. Mahler and Dr. Mann, which has been giving so much serious consideration to this pandemic that threatens to engulf us all.

The key elements of the policy of the World Health Organization, which are amply reflected in our national public health policy, are upheld in the draft resolution now before the General Assembly for consideration and adoption. For that reason my delegation is pleased to associate itself with the delegation of Australia in co-sponsoring the draft resolution concerning research, prevention and the mobilization of the necessary means to combat this scourge of our age.

The draft resolution is generous in spirit and its conceptual framework is immense. That framework conforms fully with the views of Professor George Engel of the University of Rochester, who feels that this disease should be regarded as a bio-psycho-social reality. Moreover, the outline of a programme that might emerge from this - because it suggests that we take into consideration all personal healty

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(Mr. St.-Phard, Haiti)

factors, in the manner of Paul Tournier - permits the realistic hope that we shall manage to establish the necessary pre-conditions for an effective campaign based on scientific information that is above any suspicion, that is to say, universally realiable, and conducted with the utmost vigorous for the benefit of all without exception. <u>Vamos con la lucha, con vigor, con fuego, hasta el fin del mundo</u>.

The PRESIDENT (interpretation from French): We have heard the last speaker in the discussion of this subject. I now call on the representative of Madagascar, who wishes to introduce the amendments contained in document A/42/L.9.

<u>Mr. RABETAFIKA</u> (Madagascar) (interpretation from French): Speaking as Chairman of the African Group for the month of October, I wish to thank the Secretary-General and Dr. Mahler for the statements they have made here concerning the item on our agenda entitled "Report of the Economic and Social Council: prevention and control of acquired immune deficiency syndrome (AIDS)".

The African States are aware of the seriousness of AIDS, which spares no continent, no race and no class, and that is why, as an indication of our interest in international efforts to combat this disease, the African countries have not hesitated to transmit to the World Health Organization (WHO) the appropriate information, to establish national committees for the struggle against AIDS, to adopt immediate and long-term programmes and to support the adoption of documents submitted by international or regional forums. The fact that the General Assembly recognizes the importance of the work undertaken by WHO, in such a short time and with very meagre resources, is reason for satisfaction.

(Mr. Rabetafika, Madagascar)

It could not be otherwise because we know that in the action which led to the adoption of the World Strategy to Combat AIDS, WHO defined the social repercussions and the economic and demographic impact of the disease. It has maintained a continuing dialogue and co-operation with United Nations bodies, in particular, the United Nations Development Programme (UNDP), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children's Fund (UNICEF), the United Nations Fund for Population Activities (UNFPA) and the World Bank with respect to the direct and indirect costs of AIDS in developing countries. To repeat the words of Dr. Mahler himself, that means that WHO has reacted speedily

"to face up to the disease and all its social, political and economic repercussions".

If we recognize that with its 166 members WHO has a broader base than the General Assembly, if we bear in mind that constitutionally speaking WHO is the guiding and co-ordinating authority for world health, and if we respect the ardently and rightly defended principle that there should be no duplication, we c n logically be satisfied with resolution 1987/75, dated 8 July 1987, of the Economi and Social Council, a principal organ of the United Nations on a par with the General Assembly, the Security Council, and the International Court of Justice.

However, on an issue as important as that of AIDS emulation cannot be bad provided that the respective competencies are recognized. The African States are not opposed to the idea of the General Assembly, in turn, taking a decision on the matter, but in so doing the Assembly is duty-bound to support WHO initiatives; to congratulate WHO on its efforts at world, regional and national levels; to invito States to direct their actions according to WHO's World Strategy; and also to invite the bodies of the United Nations system, bilateral and multilateral

(Mr. Rabetafika, Madagascar)

institutions, non-governmental organizations and benevolent institutions to co-operate with the WHO.

It is unnecessary to repeat here that co-ordination within the United Nations system is carried out according to well-established rules within a clearly defined framework and that the Economic and Social Council will remain seized of the question inasmuch as WHO must report to it. In the same context, we see no need for the Director-General to report to the General Assembly since he must report to the World Health Assembly and, possibly, to the Executive Board of WHO. In addition, it is always possible for a State or group of States to draw the attention of the General Assembly to a particular aspect of the report which might call for action on our part by reason of its specific character.

We do not think that it is the intention of the General Assembly, regardless of the complexity of the problems raised by AIDS, to try to substitute itself for the World Health Assembly or even to exercise control <u>a posteriori</u>. At present it is the fight against AIDS that has priority. All other considerations have their relevance to the extent that they militate in favour of reinforcing that struggle but they must not make us forget that priority or be used to justify unilateral or hasty measures on which agreement has not yet been reached.

Those are the reasons that have prompted a considerable number of African States members of the African Group to propose the amendments in document A/42/L.9. Those amendments do not reject the main proposals in draft resolution A/42/L.7 which deal directly with the prevention and control of AIDS. They are inspired by the principles to which we are attached. They seek to safeguard a certain harmonization of what is to be decided by the General Assembly and what has already been done by the Economic and Social Council which, under Article 63 of the Charter

(Mr. Rabetafika, Madagascar)

"may co-ordinate the activities of the specialized agencies through consultation with and recommendations to such agencies and through recommendations to the General Assembly and to the Members of the United Nations".

Be that as it may, we are open to consultation - some of which has already been initiated - being convinced that the world public, whose awareness we wish to heighten, although without exaggeration, realizes that, over and above differences in approach, when we speak of AIDS we speak the same language whether it be in the World Health Assembly, the World Health Organization, the Economic and Social Council or the General Assembly.

We sincerely hope that the General Assembly will reach a consensus as soon as possible.

<u>The PRESIDENT</u> (interpretation from Russian): I have to inform members that the Assembly will take a decision on draft resolution A/42/L.7 and the amendment thereto (A/42/L.9) at a later date to be announced in the <u>Journal</u>.

AGENDA ITEM 8 (continued)

ADOPTION OF THE AGENDA AND ORGANIZATION OF WORK: LETTER FROM THE CHAIRMAN OF THE COMMITTEE ON CONFERENCES (A/42/548/Add.2)

The PRESIDENT (interpretation from Russian): In accordance with paragraph 7 of General Assembly resolution 40/243, section I, the Committee on Conferences has recommended that the Board of Trustees of the United Nations Institute for Training and Research should be authorized to meet during the curren : session of the General Assembly.

May I take it that the General Assembly adopts that recommendation? It was so decided.

AGENDA ITEM 42

QUESTION OF PEACE, STABILITY AND CO-OPERATION IN SOUTH-EAST ASIA

The PRESIDENT (interpretation from Russian): Following consultations regarding this item, it is proposed that, taking note of recent developments, the General Assembly, in pursuance of the efforts to promote peace, stability and co-operation in South-East Asia, decides to postpone consideration of the item and to include it in the provisional agenda of its forty-third session.

If I hear no objection, it will be so decided.

It was so decided.

The PRESIDENT (interpretation from Russian): That concludes consideration of agenda item 42.

PROGRAMME OF WORK

The PRESIDENT (interpretation from Russian): I have to inform members of a change in the programme of work. Consideration of agenda item 26, "International Year of Peace", is deferred until the afternoon of Wednesday, 28 October.

The meeting rose at 12.30 p.m.