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### PROVISIONAL SUMMARY RECORD OF THE 11th MEETING

Held at the Palais des Nations, Geneva  
on Tuesday, 7 July 2009, at 3 p.m.

*President:* Ms. LUCAS (Luxembourg)

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Corrections to this record should be submitted in one of the working languages. They should be set forth in a memorandum and also incorporated in a copy of the record. They should be sent *within one week of the date of this document* to the Editing Section, room E.4108, Palais des Nations, Geneva.



*The meeting was called to order at 3.10 p.m.*

HIGH-LEVEL SEGMENT (*continued*)

ANNUAL MINISTERIAL REVIEW

IMPLEMENTING THE INTERNATIONALLY AGREED GOALS AND COMMITMENTS IN REGARD TO GLOBAL PUBLIC HEALTH (point 2 (b) of the agenda) (*continued*) (E/2009/12, E/2009/50, E/2009/73, E/2009/81 and E/2009/101)

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*Japan*

Mr. ITO (Secretary of State for Foreign Affairs of Japan), accompanying his statement with a computerized slide presentation, said that, as a result of advancing globalization, the population faced new threats, and in particular the internationalization of local conflicts, the generalization of poverty and the propagation of infectious diseases. In order to address such global phenomena effectively, Japan promoted the concept of human security, aimed at the protection and empowerment of the individual and the community. To ensure ownership of that concept by every beneficiary country, Japan had adopted a comprehensive approach which combined fighting against diseases with a participatory process for strengthening the health systems.

Japan had always played an active role in the promotion of global health. In particular, Japan had endeavoured to raise the international community's awareness of the issue of infectious diseases, especially at the Kyushu-Okinawa G-8 Summit, held in 2000. Currently, Japan carried out assistance programmes specifically designed to facilitate attaining the health-related Millennium Development Goals (MDGs). Despite the efforts made, however, progress was extremely slow, particularly in sub-Saharan Africa, and it was to be feared that none of those objectives would be achieved in that region by 2015. Aware of that delay, Japan had redoubled its efforts to ensure that health was a key concern in global development programmes. Thus, at the Fourth Tokyo International Conference on African Development (TICAD IV) and the Hokkaido-Toyako G-8 Summit held in 2008, Japan had stressed the need for a comprehensive approach centred on combating infectious diseases and strengthening health systems. The merits of that approach had been reaffirmed in the Toyako Framework for Action on Global Health.

Regarding lessons learned from projects carried out by Japan in partnership with developing countries, note should be made of a project against tuberculosis, implemented in the period 1999-2009 in Cambodia, where that disease was the main cause of mortality. The project, based on setting up early detection networks, had allowed in 2005 the diagnosis and recovery rates to attain, respectively, 70 and 85 per cent.

In Zambia, Japan had carried out a project consisting in setting up a database collecting information from the country's 1,400 health-care establishments. The data compiled had been used to develop, for the health sector, an investment plan, which had been used by the Zambian authorities and the donor countries as a basis for allocating resources.

Japan carried out a number of other activities aimed at strengthening health systems and focused on ensuring continuous care for mothers and children and on training qualified midwives. Convinced that cooperation on human resources development was crucial to developing countries, Japan was currently engaged in training 100,000 health workers in Africa.

The rapid spread of the A (H1N1) influenza virus around the world made it even more urgent to strengthen health systems, enabling them to face a pandemic and a possible fresh outbreak of other infectious diseases. Regarding additional resources necessary for meeting the 2015 time limit, Japan had contributed approximately US\$ 4.6 billion through its health and development initiative. The initial US\$ 5 million contributions, to be spread over five years, had been paid almost fully within only three years. Moreover, Japan had so far contributed US\$ 1.04 billion to the Global Fund to Fight AIDS, Tuberculosis and Malaria. Lastly, the international community could seize the current crisis as an opportunity to devise optimal ways of using the reduced resources available and allocating them to the vulnerable persons most in need.

Mr. MARMOT (Moderator ) invited the participants to engage in dialogue with the panellists.

Mr. SUON (Observer for Cambodia) said that that the 1999-2009 project against tuberculosis carried out in Cambodia had been a resounding success. Cambodia was grateful for the capacity-building assistance that it had received from Japan for the national anti-tuberculosis programme. The project implemented in cooperation with Japan had in particular made it possible to train medical staff, to establish a framework for addressing simultaneous HIV and tubercle bacillus infections, to diagnose, treat and prevent infection at an early stage, and to set up a viable logistics system for drug management.

He would like to know whether Japan planned to apply that strategy to other countries, whether other similar projects were already being implemented and whether Japan intended to continue to finance — through official development assistance (ODA) or other means — activities designed to enable poor countries to fight against infectious diseases.

Ms. MOGEDAL (Norway) said that Norway and Japan were actively involved in promoting global health. At TICAD IV and the Hokkaido-Toyako G-8 Summit, the two countries had cooperated closely on steering international debate towards global health and had endeavoured to link earlier G-8 summit commitments regarding specific diseases to an overall framework aimed at investing in health systems and reducing neonatal and maternal mortality. It was high time to develop national and global programmes supporting national health systems, which could not depend only on external contributions subject to fluctuation. Accordingly, Norway welcomed the progress achieved in the work of the High Level Taskforce on International Innovative Financing for Health Systems.

Noting that human security was the cornerstone of Japan's diplomatic action to promote global health, she requested more specific information on how Japan viewed that concept and asked the Secretary of State for Foreign Affairs of Japan for an example of a project financed by the United Nations Trust Fund for Human Security (UNTFHS). Lastly, she would like to know Japan's point of view on the coordination of health-related assistance.

Mr. MWAPE (Observer for Zambia) was pleased to note that the Health Capital Investment Plan (HCIP) Support Project in Zambia had been cited as an example of good practice in the oral presentation of the Secretary of State for Foreign Affairs of Japan and in Japan's related report (E/2009/86). Thanks to Japanese cooperation, Zambia had set up a comprehensive health database, covering 1,395 establishments spread over the entire country. A highly encouraging outcome of that project had consisted in the use of the information compiled and the investment programme based thereon by the Zambian Government and the donors in upgrading or investing in health establishments and equipment. He would welcome information on Japan's views on budget support.

Mr. ITO (Secretary of State for Foreign Affairs of Japan) said that Japan had, in addition to Cambodia, provided assistance to other countries affected by tuberculosis, including Afghanistan, where a currently implemented project combined the provision of medicines and medical equipment, the sending of tuberculosis specialists on the ground and capacity-building. Other countries to which Japan had sent

tuberculosis specialists included Pakistan, Myanmar, the Philippines, Bangladesh and Zambia. His country would continue to honour fully its bilateral and multilateral commitments by providing ODA to fund activities against infectious diseases.

As viewed by Japan, the concept of human security addressed the need to focus efforts on the protection and empowerment of communities in the beneficiary countries. That focus called for adopting an integrated multisectoral approach and seeking synergies among such sectors as health, education, women's promotion and sanitation. The human security concept allowed viewing public policies through the eyes of the communities concerned, for which all sectors in question were closely interrelated.

In 2008, Japan had approved allocating resources to UNTFHS, which funded a joint project carried out in Bolivia by UNICEF, the United Nations Population Fund (UNFPA), the World Health Organization (WHO) and the Pan-American Health Organization (PAHO) in order to protect adolescents against violence, avert early pregnancies, reduce maternal mortality and prevent HIV/AIDS infection in that group.

With regard to assistance coordination, he stressed that effective assistance was a key to achieving the MDGs. Japan was determined to respect the Paris Declaration on Aid Effectiveness and planned to raise the standards for policy harmonization with its partners and to contribute to the coordination efforts undertaken at the national and international levels.

Lastly, rather than budget support, Japan had always favoured project-based assistance because it contributed to capacity-building in the beneficiary countries, particularly through the transfer of technology and know-how. Japan provided budget support only rarely because most of developing countries were not yet adequately prepared to manage that form of assistance and account for the use made of such resources.

Ms. SIMONEN (United Nations Population Fund (UNFPA)) praised Japan for its leading role in supporting, through ODA, the attainment of health-related MDGs; for its contribution to enhancing access to reproductive health; for endeavouring, during the preparation of TICAD IV and the Hokkaido-Toyako G-8 Summit, to ensure that the issues related to health systems and maternal, neonatal and reproductive health were among the priority topics addressed in those meetings; and for its commitment to pursuing health sector funding assistance despite the impact of the economic and financial crisis.

Moreover, she expressed vivid interest in Jamaica's action in favour of adolescents' reproductive health and in China's observations on lessons learned from efforts to close medical coverage gaps between rural and urban regions.

Ms. BASILIO (Philippines) said that the Philippines received generous support provided by Japan for strengthening its health system. Over the years, Japan had helped the Philippines to eradicate tuberculosis, improve and renovate many provincial hospitals and acquire health equipment. Japan also provided support in various other areas, such as education. The Philippines welcomed Japan's resolve to carry on with efforts aimed at attaining the objectives agreed upon at the international level. Japan's partnership with Cambodia was an example of the significant assistance extended by Japan to new members of the Association of Southeast Asian Nations (ASEAN).

Mr. MARMOT (Chair of the Commission on Social Determinants of Health, Moderator) noted that Japan's ODA was based on the principle of human security. However, as the work of the Commission on Social Determinants of Health had shown, investment in health systems could not by itself ensure such security. He invited the Secretary of State for Foreign Affairs of Japan to explain his point of view on that point and offer details in relation to his reference to intersectoral coordination in the area of education. Lastly, he asked how Japan linked the various components of its health systems support programmes, which were aimed at human security, to maternal and infant health and to empowerment, particularly women's.

Mr. ITO (Secretary of State for Foreign Affairs of Japan) replied that Japan took a comprehensive approach to problems as a matter of principle. In order to develop, an individual needed sufficient food, good health, adequate education and freedom of choice, particularly in the professional area. Simultaneous action at various levels was therefore necessary.

Japan sought two types of coordination, namely coordination with actors of non-health sectors — such as, for instance, business, administration and NGOs — and coordination with experts in areas having an impact on human security, particularly education and investment. Actually, investment was a key to human security because, since the long-term objective was to empower the countries concerned, they needed the economic fabric and resources necessary as a basis for such empowerment.

After the war, Japan had managed to reduce maternal mortality to a very low level by focusing on post-natal care for infants and mothers, who were provided with a handbook on maternal and

neonatal health; by introducing maternity checks and an allowance enabling women to meet childbirth costs; and by obliging enterprises to grant maternity leave. A number of countries drew inspiration from those practices and adapted the handbook on maternal and neonatal health to their particular situations.

#### *Plurinational State of Bolivia*

Mr. SUXO (Plurinational State of Bolivia), accompanying his statement with a computerized slide presentation, said that, for Bolivia to attain the MDGs, the far-reaching structural reforms envisaged by its new Constitution and its National Development Plan were necessary. Building on the principle of “Living well”, namely leading a community-based life and having respect for others and for cultural diversity and being in harmony with nature, the Constitution was based on the principles underlying the United Nations Declaration on the Rights of Indigenous Peoples. Those principles were crucial to attaining the MDGs in a country where most of the population was of indigenous origin.

The National Development Plan comprised four components. The “Productive Bolivia” component provided for the adoption of a new integrated and diversified development model based on the transformation of renewable and non-renewable natural resources. The “Dignified Bolivia” component aimed at the elimination of poverty and inequalities and the introduction of an equitable model for the distribution of resources. The “Democratic Bolivia” component aspired to the political empowerment of the people at the regional level and their participation in making development-related decisions. Lastly, the “Sovereign Bolivia” component was designed to ensure that the country functioned as an independent actor at the international level. Referring to various measures taken by his Government in recent years, he said that the nationalization of hydrocarbons and ongoing reforms were based on the view that foreign investors should be the country’s partners, not owners. The economic achievements accomplished included the tripling of public investment; the reduction of external debt from 155 per cent of GDP in 1982 to barely 14.5 per cent of GDP at the end of 2008; the increase in international monetary reserves; the quadrupling of the trade balance surplus in the period 2006-2008; and the improvement of the budget situation from a 5 per cent deficit in 2005 to a current 3.1 per cent surplus.

The protection of the most vulnerable persons, particularly children and the elderly, was a priority. The school dropout rate had declined from 4.5 to 2.5 per cent thanks to the introduction of the so-called “Juancinto Pinto” school voucher for 18 per cent of the

population. Since January 2008, all persons over 60 were entitled to an annual so-called “dignity pension”, equivalent to US\$ 320. Illiteracy had been eliminated to the extent of 96 per cent and, within three years, 819,417 persons, or 8 per cent of the population, had learned to read and write through the “Yes I can” programme.

Health constituted one his Government’s top priorities. Eager to promote safe motherhood, reduce maternal and infant mortality and the chronic malnutrition rate among children two years old or younger and contribute to the comprehensive development of those children, the Government had introduced, in 2009, the “Juana Azurduy” mother-child voucher, equivalent to US\$ 270, to which 250,000 mothers and 260,000 children would ultimately be entitled. The number of medical consultations had increased by 26 per cent since 2005, and free ophthalmologic care — including surgery — was provided as part of “Operation Miracle”. Since 2006, 545 new health-care establishments had been opened.

The issue of land ownership was crucial in a country such as Bolivia, where the distribution of property was particularly unfair. Since 2005, the Government had provided 98,454 families with ownership titles to 23.7 million hectares. Other specific achievements of his Government included the development of drinking water and electricity supply networks, a 50 per cent increase in the minimum wage, the adoption of a series of legal provisions enhancing safety at work and prohibiting forced labour, the production of 82,000 tons of basic foodstuffs to strengthen food security and sovereignty, the creation of 22 national parks and a massive increase in investment in the integrated management of hydrographic basins.

As a result of those efforts, the incidence of extreme poverty had decreased from 41.2 per cent in 1996 to 31.8 per cent in 2008. The incidence of chronic malnutrition had dropped to 20.3 per cent, declining by 5.3 per cent, and full elimination of malnutrition by 2015 was the target.

Infant mortality had been reduced by 50 per cent and further measures were taken in order to achieve the related MDG. The rate of medically assisted childbirths had reached 64 per cent in 2008 and the health sector’s target in that connection was to attain 70 per cent by 2015.

Much remained to be done by Bolivia before its development objectives were attained. Progress was necessary in such areas as universal access to primary education; the fight against diseases, inter alia tuberculosis and the Chagas disease; and equal opportunities for men and women. At the level of regional and multilateral cooperation, joint efforts should continue, especially those which, within the



framework of the Bolivarian Alternative for the Americas (ALBA) and the Union of South America Nations (UNASUR), had led to substantial progress, particularly with regard to education, health, nutrition, trade, credit and the fight against drug trafficking. At the international level, more countries should allocate 0.7 per cent of their GDP to ODA to help poor countries. With regard to trade, countries such as the United States should immediately restore customs preferences which they had withdrawn from Bolivia for political reasons.

In order for the MDGs to be attained, it was essential to modify the international financial and economic architecture. The World Bank, the International Monetary Fund (IMF) and the World Trade Organization (WTO) should be thoroughly restructured with a view to meeting more effectively the needs faced by developing countries because of the global crisis. The MDGs called for a new global vision in the twenty-first century. Complementariness should take precedence over competition, and solidarity over individualism, while human beings should be enabled to live in harmony with each other and with nature. In that connection, Bolivia proposed adopting a declaration on access to water as a human right, and considering a universal declaration of the rights of Mother Earth.

Mr. ÁLVAREZ (Observer for Cuba) said that the encouraging progress achieved in Bolivia by the Government of President Evo Morales was a clear example of the potential of political resolve to give priority to the needs for the poor and the oppressed. Currently, the country was better placed to achieve the MDGs. In the field of education, the Government had focused on combating illiteracy, which it had reduced by 96 per cent. As early as 2008, Bolivia had become the third country to attain the goal set in that area. He praised the innovative initiatives undertaken by the Government to ensure access to education for all. Significant improvements had been achieved in the area of health, regarding, in particular, maternal health and children's development up to the age of two through an allowance ultimately benefiting 250,000 mothers and 260,000 children, namely, 74 per cent of families without access to social security. He also hailed measures that had doubled the number of health-care establishments since 2006, and the promotion of such international cooperation programmes as "Operation Miracle", which, in Bolivia alone, had allowed more than 326,000 persons to undergo eye surgery in recent years. Effective international cooperation was crucial to helping the developing countries to achieve the MDGs. He requested the Bolivian delegation to identify areas in which the Government would welcome greater international cooperation, so that countries with the necessary capacities could consider supporting short- and medium-term programmes in Bolivia.

Ms. FARANI AZEVÊDO (Brazil) said that the promotion of such fundamental rights as entitlement to health, education, housing, employment, development and food was a priority for Brazil as much as for Bolivia. The strategy carried out by the Bolivian Government over a number of years with a view to promoting equity and social justice had produced significant results. In the area of education, Bolivia had managed to reduce illiteracy and truancy. The increase in the minimum wage had been of direct benefit to those most in need and had boosted incomes and consumption. Useful information had been provided on the increase in the number of health-care establishments, the improvement of the state of health of mothers and young children, the expansion of drinking water supply and the progress achieved in issuing land property titles. In its report, Bolivia had admitted that much remained to be done. It was therefore necessary that Bolivia should be able to rely on the international community, and on United Nations agencies in particular, for ongoing support.

Within MERCOSUR, Bolivia, participated as an associated State in the expansion and diversification of trade relations among the countries of that bloc, a process which had enabled them to face the impact of the international economic and financial crisis under more favourable conditions. Bolivia had also played a key role in the creation of UNASUR, which aimed at promoting more equitable and integrated development in South America. Cooperation between Brazil and Bolivia in the energy sector had stimulated growth and employment in both countries. They also cooperated in stemming the effects of the financial crisis by investing in infrastructure. Brazil was determined to continue to cooperate with Bolivia in promoting the social and economic development of both peoples according to the principles of respect, friendship and mutual trust, on which relations between the two countries were based.

Mr. SANTOS (Observer for Ecuador) praised the progress achieved in recent years by the Plurinational State of Bolivia in building a just and equitable society centred on the human being and on respect for the planet. That development was part of the movement which had brought progressive Governments to power in various Latin American countries. The Government, led by Evo Morales, was carrying out structural reforms aimed at strengthening a participatory democracy which empowered broad sections of society, which had been marginalized in the past. Of the advances referred to in the Bolivian presentation, his delegation attached particular importance to progress achieved on the external debt, land transfers and redistribution, and rural power and drinking water supply coverage. Such progress would doubtlessly contribute to improving living conditions in Bolivia.

Mr. ALVIAREZ (Venezuela) said that his country supported the policy inspired by the Bolivian Government's vision of a plurinational State and better living conditions. Within the framework of ALBA, Venezuela favoured a new international geopolitical perception based on complementariness rather than competition, and on solidarity, cooperation and the participants' full sovereignty in order to gradually bring about a new social and economic order. The Bolivian presentation had shown how, by recovering natural resources previously controlled by multinationals and managing those resources for the benefit of the country's peoples, the Bolivian Government had accomplished so much in the social and economic areas in such a short time.

Venezuela supported Bolivia's proposal for a declaration on access to water as a human right. That good was as fundamental as health, could not be treated as merchandise and should be universally guaranteed by States. His delegation also viewed with interest the proposal to consider a universal declaration of the rights of "Pachamama" or Mother Earth. The transformation of the international financial architecture was a relevant topic. All member States of the World Bank and IMF should have control over those bodies in order to ensure that they served the peoples and actually helped to eliminate poverty.

Mr. WINTER (Uruguay) fully approved the importance attributed by Bolivia to the population's access to drinking water as a basic right and encouraged the Bolivian Government to pursue its efforts in that area. His delegation noted with interest the priority given to children in the framework of strategies for achieving the MDGs, particularly through programmes against dropping out of school, maternal and infant mortality and chronic malnutrition of children up to the age of two; and would welcome specific information on the means used to combat such malnutrition and the results thereby achieved.

Mr. CRUZ TORUÑO (Nicaragua) stressed the importance of information, provided within the framework of the Economic and Social Council, on the experience of other countries, especially of the same region. Such an exchange of good practices helped Nicaragua to progress towards the objectives that had been set. The Nicaraguan delegation noted with interest the launching of Bolivia's national development plan, an integrated initiative based on the principles of dignity, social justice, democracy and sovereignty. The constitutional and institutional reforms undertaken by the Bolivian Government had exerted a positive impact despite lingering challenges, which could be overcome only by means of the political resolve shown so far and with international support. It would be interesting to know whether the new challenges posed by the

recent global financial crisis had forced the Bolivian Government to revise its national development plan.

Mr. HACKETT (Barbados) congratulated the Bolivian delegation for its thorough presentation. He noted that responsible public accounts management had led to a 3.1 per cent budget surplus, used to finance vigorous programmes aimed at achieving the MDGs at the national level. Significant progress had apparently been achieved, and the national approach which had been adopted constituted an interesting model for developing policies aimed at eradicating extreme poverty. The Barbadian delegation hoped that Bolivia would manage to continue progressing despite the global economic and financial crisis and would receive increased support from its development partners without undue strings attached.

Mr. SUXO (Bolivia) stressed that, in pursuing the MDGs, Bolivia had not been satisfied with analysing only social issues and treating conspicuous aspects of poverty, but had also focused, through a nationalization process, on the resources necessary for funding that pursuit more effectively. Moreover, his Government's approach to the problem of poverty involved questioning the practices of such organizations as IMF and WTO. Cuban cooperation had set an example which was particularly significant to Bolivia but South-South and North-South cooperation efforts could not be really effective without a reform of those multilateral bodies. Regarding priorities for future action, Bolivia considered it particularly necessary to enhance protection for small producers, to stimulate research on and development of new drugs against rare diseases, especially those affecting developing countries, and to intensify the exchange of successful experiences in promoting universal primary school education. With regard to combating malnutrition, a programme for promoting the use of food supplements and micronutrients had been launched in April 2009 for children up to age two. With regard to the international crisis, the National Development Plan focused not only on social needs, such as food security, but also on incomes, housing and employment.

Mr. MARMOT (Moderator) noted that the participants had largely expressed support for the principles of pragmatism, democracy, dignity and sovereignty, which guided the policy of Bolivia and had been highlighted in the delegation's presentation. As conceived by the Bolivian Government, the fight against poverty was not confined to the immediate manifestations of the problem, but also included the elimination of illiteracy and the promotion of education. The Bolivian delegation had presented the problem against the backdrop of the

economic situation. Although there had been no response from the international financial institutions, whose representatives were not present in the room, a number of delegations from sister countries in Latin America had expressed their support for Bolivia.

### *Mali*

Ms. SINA DAMBA (Minister for the Promotion of Women, Children and the Family of Mali), accompanying her statement with a computerized slide presentation, said that Mali's basic features included common borders with seven countries, a landlocked location and a human development index (HDI) level of 0.385. The national development strategies in place comprised a 2007-2011 Growth and Poverty Reduction Framework (GPRSF) and a 2008-2012 economic and social development programme, whose ultimate objective was to make Mali an agricultural power and an emergent economy by 2015. In assessing the progress achieved and referring to lessons learned in pursuing the MDGs (sect. 4 of the report), she detailed the constraints encountered and the Government measures taken in relation to each goal.

In the area of primary school education (MDG 2), the 10-year education development programme had made it possible to raise the school enrolment and literacy rates through infrastructure enhancement, teacher training and the purchase of books. In the fight against extreme poverty and hunger (MDG 1), notable progress had been achieved with regard to food security and combating malnutrition through the adoption of an agricultural orientation act and the implementation of a national irrigation development strategy and an accelerated growth strategy. Regarding the environment (MDG 7), the achievement of the relevant target by 2015 seemed possible thanks to the formulation of a water resources development policy and strategy and the establishment of a national information system on water.

In certain areas, significant progress had been achieved, despite lingering difficulties. For instance, with regard to health (MDGs 4 and 5), maternal and infant mortality rates were still too high, although they had declined and the HIV/AIDS prevalence was lower. That situation was due to various constraints but the Government had taken a number of measures, including the signature of the "Compact", which aimed at establishing a single framework for enhancing the effectiveness of health-related assistance and involved more than 10 technical and financial partners (TFPs). Mali had declared 7 July "safe motherhood day". Lastly, with regard to gender equality and women's empowerment (MDG 3), measures had been taken (including, in particular, a national gender equality policy, a draft code on the individual and the family, and a microcredit access programme for women and young persons) in

order to address economic, legal, institutional, social, cultural and technical obstacles, women's low literacy level and disregard for gender issues in decision-making bodies.

She referred to the possibilities offered to Mali as a result of the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action, which were expected to facilitate national ownership of assistance; the Joint Country Assistance Strategy, which could make assistance more predictable, while aligning it with national procedures; ongoing political dialogue between Mali and TFPs; and, in particular, as a result of consensus on the country's main development strategies. However, non-compliance with fund due dates caused cash shortages, while the global economic and financial crisis and stalled WTO negotiations could aggravate the situation.

After referring to the financing needs detailed on page 23 of the report (E/2009/95), she concluded by underscoring Mali's considerable economic and social assets, which should ensure a strong growth and sustainable development and contribute to attaining MDGs 1, 2 and 7 by 2015. The successful implementation of the poverty reduction initiative in 166 of the country's communities was expected to accelerate the attainment of the MDGs. New sources of growth had been identified in agriculture, energy and transport but it was necessary to pursue reforms in order to attract additional foreign direct investment (FDI). The international community, particularly donors, should respect their commitment to providing more ODA.

Mr. OLDHAM (Canada) congratulated Mali for the — admittedly still fragile — results achieved in the areas of health, education, drinking water management and food security, and for the Government's manifest resolve to introduce reforms. Donors must respect their commitment to increasing international assistance and implementing the Paris Declaration on Aid Effectiveness.

In the area of health, despite a decline in HIV/AIDS prevalence and improvement regarding access to health services, Mali's maternal and infant mortality rates continued to be alarming. Various initiatives in education, health, social development, justice, the public sector and public finance had been effective. However, in the areas of justice and combating corruption the mechanisms and instruments in place had yet to be applied, a task which Canada and other international partners could support. Lastly, in view of the economic, legal, institutional, social, cultural and technical difficulties still faced by Malian women, Canada resolutely favoured any initiative aimed at implementing in Mali the Convention on the Elimination of All Forms of Discrimination against Women and the Protocol to the African Charter

on Human and People's Rights on the Rights of Women in Africa, and would welcome discussing specific measures for improving women's participation in political life.

Mr. MATTEI (France) noted that France was a principal partner of Mali and, contributing 26 per cent of the bilateral ODA offered, ranked first among Mali's bilateral partners. He congratulated Mali for its commitment to implementing the Paris Declaration on Aid Effectiveness and for the preparation of its national health plan and encouraged it to continue with structural reforms in order to support growth and improve the business environment with a view to promoting FDI. The international community should support the steps Mali took to attain the MDGs, an effort which directly absorbed 40 per cent of French assistance.

In the area of social development, given that 80 per cent of the population still lacked access to the social protection system while the financial crisis could aggravate the situation of the vulnerable population, France encouraged the Malian Government to set up social protection nets in favour of such groups. In view of persisting regional and gender disparities in the areas of health and education, it was necessary to continue ongoing efforts to reduce such inequalities. Lastly, noting that progress had been achieved in the fight against HIV/AIDS, he assured Malian authorities that France was committed to promoting universal access to health care, especially in the case of the most vulnerable sections of the population.

Mr. FEYDER (Luxembourg), having praised the presentation of the situation in Mali for its thoroughness, said that, in the framework of the comprehensive cooperation agreement signed in 1998 between Luxembourg and Mali, an ambitious indicative cooperation programme, which included a five-year financial package ensuring the predictability of Luxembourg's contribution, was being implemented. The programme's priority targets were the reduction of maternal and infant mortality, access to drinking water and sanitation, training and good governance.

Within the framework of bilateral cooperation, a basic health support programme focused on the population of the Ségou and Sikasso regions (in the south of Mali) sought to build the capacities and capabilities of health workers and promote social mobilization; to improve health-care quality; to broaden health-care coverage; and to set up and ensure follow-up of community financing mechanisms. In the Kidal region (in the north), a substantial development project was aimed at enhancing access to quality education and health services.

At the multilateral level, Luxembourg supported projects implemented by United Nations funds and bodies (in particular the

World Health Organization (WHO), the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF)) in partnership with the Malian authorities. Moreover, Luxembourg's civil society was significantly mobilized for Mali, in support of basic health improvement projects co-funded by the Luxembourg Agency for Development Cooperation. Lastly, he affirmed that the only objective of Luxembourg's partnership-based approach was to help Mali to attain its own development goals, particularly in the area of health.

Mr. GRAULS (Observer for Belgium) said that, as part of a solid partnership established between Belgium and Mali 30 years earlier, a new indicative cooperation programme had recently been set up for four years (2009-2012). With funding of €50.5 million from Belgium, the programme focused on rural development, food security and decentralization. Dynamic cooperation also existed between NGOs and universities in both countries. Mali, evolving into a country respectful of human rights and keen on its population's socio-economic development despite difficult geographic and climatic conditions, based its development policy on State reform and engaged in close dialogue with civil society.

Despite the current financial crisis, the international community should honour pledges, made at the Donors Round-Table Conference of Mali (Bamako, June 2008), to increase their development assistance to Mali. Mali's TFPs had proposed a joint assistance strategy, currently at the stage of approval by the Malian Government. He praised the regional approach adopted by Mali through active participation in the work of the West African Economic and Monetary Union and the Economic Community of West African States and invited the international community to support and assist Mali in combating terrorism and drug trafficking in the north of the country, practices which were incompatible with the culture and friendly disposition of the Malian people.

Mr. ST. AIMÉE (Saint Lucia) congratulated the Minister for the Promotion of Women, Children and the Family of Mali for her well structured presentation of the situation in her country and stressed the importance, well understood by Mali, of quality primary education, which was a prerequisite for successful development efforts.

Mr. JAZAÏRY (Algeria) praised Mali as a model for all countries because it had shown that wealth was not indispensable for promoting democracy and human rights. The main prerequisite that Mali should meet in order to overcome the obstacles to the achievement of the MDGs was to ensure security and national unity. Algeria and Mali



were partners in combating the scourges of smuggling and terrorism, with which they needed to confront.

In view of the modest external assistance received and the impact of certain wealthy countries' subsidy policies on its cotton and animal breeding sectors, Mali's achievements had been remarkable. The international community should ensure that the policies pursued by its members allowed Malian farmers to derive greater benefit from their often unproductive soil.

Pilot projects carried out in the area of Ségou under a 1965 bilateral trade agreement between Algeria and Mali had shown that Mali possessed an exceptional human capital, a valuable asset, to whose enhancement all should contribute by increasing international assistance for agricultural development. Algeria firmly believed in the success of the South-South cooperation in which Mali participated and in Mali's action in the framework of the African Union.

Ms. SINA DAMBA (Minister for the Promotion of Women, Children and the Family of Mali) thanked the friendly countries which had expressed support and said that, the previous week, the President of Mali had made a similar presentation at Surt, Libyan Arab Jamahiriya, addressing the African Peer Review Mechanism, a positive procedure which spurred a country to progress. On behalf of her Government, she pledged not to give up and to continue to work with determination.

Replying to the French observation on regional disparities, she said that the Malian authorities sought solutions and expected that decentralization would help to reduce such gaps. The ongoing health-care coverage expansion policy and the introduction, as from 2010, of a social security scheme already approved by the Government should also contribute to that reduction. That scheme was currently being examined by the National Assembly. Lastly, firmly committed to gender equality, she affirmed that the genders were as complementary as a bird's wings and that a balanced approach was necessary for the world to move forward.

Mr. MARMOT (Moderator), concluding the series of national voluntary presentations, noted that various speakers had referred to many encouraging achievements towards attaining the MDGs, particularly with regard to health. However, there remained significant challenges, underlying the uneven distribution of those achievements among and within various countries.

*The meeting rose at 6.25 p.m.*