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**Statement by
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Madame Chair, distinguished delegates, ladies and gentleman,

As we approach the 15th anniversary of the International Conference on Population and Development, we see an impressive record of achievement. Since the Programme of Action was adopted in Cairo in September 1994, the majority of developing countries have made major progress towards attaining its objectives.

Yet, major gaps remain in implementation, especially in the least developed countries. The persistence of these gaps is particularly worrying because, as we have known for some time, achieving the Cairo objectives can contribute, both directly and indirectly, towards the attainment of other development goals and, particularly, the Millennium Development Goals.

The Commission has thus set itself a critically important task for this session: to examine the evidence of how implementation of the Cairo Programme of Action can contribute significantly to the achievement of other internationally agreed development goals; and to review estimates of the funding levels needed to reach the core objectives by 2015. This should also contribute to progress towards the development goals, focused on the global public health agenda.

In one of the great achievements of the Cairo Conference, the ability of women to control their own fertility and make decisions free of discrimination or coercion were proclaimed as cornerstones of population and development policies. Today, reproductive rights are recognized, which are, in turn, essential to the socio-economic development of their communities. Moreover, many countries have proven that, by enabling women and their partners to have the number of children they desire, fertility levels drop, changing population dynamics in a beneficial way.

Indeed, since Cairo, evidence has accumulated showing that reductions in fertility have many positive effects.

Let us look first at the goal of reducing maternal mortality, the MDG towards which tragically the least progress has been made across the world. Lower fertility reduces maternal

pregnancies she experiences over her lifetime. Enabling women to control the timing of pregnancies and to avoid unwanted pregnancies would reduce the incidence of maternal death by between 25 and 40 per cent – a major human achievement.

Lower fertility can also serve the goal of reducing child mortality. Children have much better chances of surviving infancy if they do not have siblings born too close to themselves. Furthermore, increasing the interval between pregnancies can help not only to reduce child mortality, but also to enhance child nutrition and protect the health of mothers.

Better health outcomes for women and children mean progress not only towards the health-related MDGs, but also towards interconnected objectives in the areas of education,

Finally, looking at populations as a whole,

Most of the populations that still have very high fertility of the order of four children per woman or higher are also those where the unmet need for family planning is moderate or high. Today, an estimated 106 million married women in developing countries have an unmet need for contraception. In sub-