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INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT

Statement by

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World Health Organization

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Mr. President,

Your Excellencies,

Ladies and Gentlemen,

Today, in Cairo, on the eve of the twenty-first century, the future is
our concern and must be our common responsibility. As we focus on
"population and development", we want to emphasize that population is

not just about numbers. It is about human beings. Fertility rates, birth rates, morbidity and mortality rates are not just statistics. They tell the story of real people. They are about the lives and deaths of human beings, their personal relations, their happiness and suffering. We also want to stress that development includes, but goes much beyond economic growth. There is development when there is a process of growth and enhancement of the well-being of all individuals in society. And there will be sustainable development when this process takes place in all societies worldwide. "Population and Development" is about equity, social justice and respect.

There can be no future in fear and mistrust. The future must be built on the recognition of our interdependence, as we learn to live and work together, in a spirit of respect, sharing, and mutual responsibility. We must move away from taking an alarmist view of population changes as if people, other people, could only be potential threats to us. People represent opportunities and resources for the future, provided they are given the chance to fulfill their capabilities. The world needs its peoples, especially those who until now had little or no part in development, to join in and stimulate the process which brings about economic growth together with health, education and democracy.

Today, we are meeting in Cairo to help improve and broaden development opportunities for all. Let there be no mistake about it. Our fight must be against poverty, not against the poor!

Health is central to development. Because human energy and creativity are the driving forces of development, there can be no sustainable social and economic growth without a healthy and active population. For all individuals, health is an integral part of quality of life. In any

society, at any point in time, health is also an essential factor and indicator of the quality of development achieved.

Today, the world population is undergoing considerable change, not only in absolute numbers but also, and may be more importantly, in its age structure and geographical distribution, in people's lifestyles and their participation in public life. Aging, urbanization and migration are massive demographic trends which are fast becoming formidable challenges to all societies worldwide. Chronic, noncommunicable diseases such as cancer, cardiovascular diseases and diabetes, which can also be related to lifestyles, aging and environmental hazards, are on the increase everywhere.

While important progress has been made in disease control and prevention, the world has to face the powerful come-back of such diseases as tuberculosis, diphtheria, malaria and cholera. The HIV-AIDS pandemic, a new scourge which now affects all countries, is a threat to the whole world's population and to development. To meet new, increased, and ever more complex health needs on the part of their people, all countries have to plan for extensive revitalization of their health systems. And they must do it now. A first step should be the recognition, in public policies and funding, of the overriding importance of health for individual and social development.

By the year 2050, when we aim to have achieved global stabilization of the world population, 'aging will have become the major population feature in all societies around the world. But today, rapid and unmanaged population growth remains a serious obstacle to development. In some countries, it outstrips the national capacity to improve—or even maintain—the economic and social conditions of the people

To deal with such challenges, policies will be most successful and sustainable when they fit with people's personal needs and expectations about their own lives and relations, and the quality of life they want for their children. In other words, population policies must be made, accepted, willed and practiced by the people themselves. Population policies must be multifaceted. They must aim at reducing poverty through economic growth, income generation, and development of social and economic infrastructure. They must also strive at empowering women and improving their status.

First and foremost, women must be able to enjoy a level of health and well-being which will allow them to live fulfilling lives. Women must be provided with easy access to safe, acceptable, affordable, and quality health care. This must include reproductive health care. Second, women's options for personal development must become broader through enlarged education and employment opportunities. And third, women's personal, social and economic status must be promoted and protected by law.

WHO has always maintained that individuals and couples should have free and responsible access to family-planning. For the past twenty-five years, WHO has pioneered basic and operational research on safe and effective contraceptive methods for both men and women. Together with its Member States worldwide, WHO has been able to conduct technical cooperation programmes in the field of reproductive health, in search of practical solutions which are acceptable to all. The World Health Organization upholds the principle that coercion is not acceptable. And that confidentiality must always be respected. Coercion and breach of confidentiality violate medical ethics and human rights. They are counterproductive for society as much as for individuals, as they undermine the relation of trust which must exist between people and

health care workers.

WHO's position on reproductive health is that, in all cases, women should receive the appropriate, safe, effective and humane health care which is morally and professionally owed to all human beings. WHO supports Member States in their efforts to prevent unwanted pregnancy and reduce abortion by ensuring access to safe, effective and culturally appropriate family planning services which are affordable and acceptable to all individuals and couples. WHO wishes to reiterate that abortion cannot be promoted as a contraceptive method.

Ideological fights can only end in confrontation and bitterness. Above all, they do nothing to alleviate the actual suffering of those who are in need of help. The real dilemma for our Conference is to ensure that unnecessary suffering can be prevented and alleviated. How can we make sure that all people, families, and communities, can make a choice for health and well-being? The truth is that for most people, there are no choices. They have as little choice about the timing, spacing and number of their children as they have influence over their children's and their own chances for survival- and quality of life.

Worldwide, people die, and especially women and children, because there is no care, no qualified staff, no clean water or equipment ready at hand, because there are no drugs, no oral rehydration salts, no blood supply and no antibiotics. They die because the only clinic is miles away and because there is no public transport, because the family does not have the money, and also because they do not know. They have no choice. And much of the responsibility for ensuring that these people are able to exercise choice in their lives lies with governments.

Worldwide, only half of the women in labor have someone nearby who can

help if things go wrong. Half-a-million women at least die each year as a direct result of complications arising during pregnancy and delivery. It is estimated that approximately 13% of them die of unsafe abortions, trying in desperation to terminate unwanted pregnancies. Others die because they bear too many children, too close together, because they are too weak, chronically anemic, too young, or too old. Every year, 12.9 million children die before they reach the age of five and 4.3 million of them, that is one in three, die within one month of their birth. And for every mother or infant who dies during the critical period of birth, many more who survive are damaged physically and mentally.

Every day, every year, 1400 women in the prime of life and 12 000 newborn babies die for lack of care during pregnancy or childbirth. This is the real nature and scope of the plight and suffering of millions of human beings. We must keep it in mind to do them justice. For millions of women, children, and men too, there will be no real freedom of choice unless it extends to all circumstances of their lives and the alternatives are of their own choosing. And there will be no real rights for them until they have access to more than bare survival, that is to quality of life.

It would be a sad irony if our efforts to empower women were to be reduced to a debate on abortion, and if the role and well-being of women were to be reduced, once again, to just one aspect and one moment of their lives and reproductive health, however important it may be.

For the future development and well-being of both women and the world's population, it is just as important that modern technology should not be used to selectively phase girls out of existence through prenatal

identification. It is as important that baby-girls should be breastfed as long and receive as much care and nutritious food as baby-boys. It is essential that girls should have as much schooling and the same education opportunities as boys do. It is also important that the gender-bias which, to this day, persists in medical and epidemiological research, be corrected. Women's specific health needs and biological responses throughout the life course can then be better understood and appropriate prevention and care provided. This will contribute to reducing morbidity and mortality among women, and thus increase their chances to live a fuller life and a disability-free old age.

Death always is a human tragedy, but maternal deaths in particular are disastrous for the chances of survival and quality of life of all other members of the family. They are disastrous for the development of any community. Together with its United Nations partners, WHO is fully committed to preventing maternal deaths and disabilities.

WHO has pledged to reduce mortality and morbidity rates significantly among mothers and children by the end of this century. Achieving these goals does not require sophisticated technology. It requires comparatively modest but sustainable funding. It also requires a consistent strategy to promote safe motherhood while serving the needs of infants, young children and women.

WHO has now made this strategy available to countries, as the Mother-and-Baby Package, to help them integrate health care for mothers and children. The Mother- and-Baby Package is a practical tool to intensify prevention, identify and manage health-related problems, and look at what is available in terms of human and material resources. It offers guidance on improving skills, equipment, research and standards of care, monitoring and evaluation, while focusing on the delivery of family-

friendly services at the local level.

Under the family health concept, WHO has consolidated and expanded its mother and child health activities. WHO is convinced that health issues are most effectively dealt with in the family environment, by promoting information, education and involvement—that is, empowerment of all family members over their own health. Experience has shown that the family health approach is well-liked and well-received by all communities when there is support from public health staff and services. Family health helps make the best use of limited resources and, last but not least, it is effective.

It is within the family that people's health problems are missed or identified. It is within the family that individuals are given or denied simple and crucial care. It is within the family that health is promoted or endangered, through shared lifestyles, quality of food and hygiene, violence or respect, and physical and emotional care or neglect.

At a time when prevention is the only effective weapon we have against HIV-AIDS, it is particularly important that we educate families and the young about risk-factors and safe and responsible sexual behavior. Adolescence is a time of growth and change, of experimenting and risk-taking. All societies, all cultures and religions, can accommodate both accurate and sensitive sexual education for their young. Health education can be most effective when provided within the family or in the schools, at a time when children learn solidarity and responsibility.

WHO believes it is essential to extend health information to men and enlist their participation in the enhancement of family health. It will

enable them to better understand and share responsibilities for family planning, for the prevention of sexually transmitted diseases and HIV-AIDS, for the care of the young, and for supporting and protecting the physical and psychological safety and well-being of their families.

The challenge is to provide actual delivery of integrated health care in response to people's needs. We must ensure not just coverage but quality of care. In pursuance of these goals, WHO has established and is advocating new health partnerships, with all sectors of society, all countries and agencies.

Health cannot be fragmented. Reproductive health is an integral and essential part of general health. Reproductive health needs are not confined to women of reproductive age but are important components of general health for infants and children, for the elderly and for men. Reproductive health services cover fertility and infertility management, prevention and management of reproductive tract infections and cancers, prevention, detection and treatment of HIV-AIDS and sexually transmitted diseases, and maternal health and safe motherhood. They must be a component of all primary health care services. Reproductive health care must be provided across the life span of all individuals and it must accord with the highest ethical and technical standards possible.

Reproductive health care is decisive for the health and well-being of families and future generations. With a better start in life, future generations will be better able to contribute actively and productively to the social lives of the communities in which they live. As we strive to provide people with a chance to live fuller, longer and healthier lives, let us not forget that—in the words of the humanist, Vaclav Havel, "the basic measure of the general state of decency is how a society cares for its children, its sick, its elderly, and its helpless.

In other words, how it looks after its own". Ultimately, our society, and each one of us, will be judged by how we care for our people, for all our people.

Population is not just about numbers, and development does exceed economic growth by far. population and development" is about equity, social justice and respect, the fundamental ethics of Health for All, which remains at the core of WHO's mission and international health action.

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