

Statement to The Hague Forum, 8-12 February 1999

As written:

**ADDRESS BY THE HONOURABLE MINISTER OF STATE
FOR HEALTH, AND LEADER OF THE NIGERIAN
DELEGATION, DR. ABUBAKAR ALI-GOMBE
AT THE HAGUE FORUM, THE HAGUE,
FEBRUARY 8th - 12TH, 1999**

PRESIDENT OF THE CONFERENCE,

YOUR EXCELLENCIES,

DISTINGUISHED DELEGATES,

LADIES AND GENTLEMEN,

It is gratifying that we have this opportunity to meet after five years to discuss the progress made in the implementation of the Programme of Action adopted in Cairo, Egypt in 1994. I have the honour to bring to you the warm and fraternal greetings from the Government and People of the Federal Republic of Nigeria on this important occasion. I am also pleased to convey to you the steady progress being made towards democratization and return to civil administration in Nigeria. In this regard, permit me, Mr. President, to request you to convey our appreciation to the Secretary-General of the United Nations, Mr. Kofi Anan for the encouragement and support given to Nigeria in overcoming the pains of transition to democratic governance and in smoothing the return of the country to the international fold.

I would like to congratulate you, the President of this meeting, other elected officers and all those who have contributed to the organization of this conference.

In the last five years, our experience in the implementation of the Programme of Action has not been as encouraging as we would have wished it to be. As you are aware, during the period under review, Nigeria has been engulfed in painful transition process to democracy and civil governance. As a result of the misunderstanding of the international community of our efforts in democratization, sanctions were imposed on Nigeria. These sanctions brought untold hardship to the common man and robbed the country of much needed international support and technical assistance to developmental efforts. The effect of the sanctions on the National Population Programme is tremendous as donors which were responsible for the supply of contraceptives to the system, suddenly withdrew. It is common knowledge that without contraceptive, there can be no successful population programme.

In this regard, I would like to express our thanks to the United Nations Population Fund (UNFPA) and its Executive Director, Dr. Nafis Sadik, for standing by Nigeria and stepping in to fill the gap in the implementation of our Programme of Action when all other bilateral international agencies withdrew their technical assistance as a result of sanctions imposed on our country by their respective countries. Without the support and

assistance of UNFPA, the National Population Programme would have been seriously affected.

Mr. President, inspite of the given preceding scenario, some progress have been made in the implementation of the Programme of Action in Nigeria judging by selected indicators for monitoring ICPD goals and by demographic, social and economic indicators. with regards to demographic indices, the population of the country by mid-year 1999 projection is 110.5 million with a growth rate of almost 2.83% per annum. The total fertility rate has declined marginally to 5.8% children per woman. The infant and maternal mortality rates have remained unacceptably high at 77 per 1000 and 1000 per 100,000 respectively while the life expectancy has remained low at 52 years. Access to and knowledge of contraceptives have not significantly improved. This has resulted in a decline in the use of contraceptives largely due to the withdrawal of supplies by bilateral international agencies applying sanctions against Nigeria and early child bearing has remained a c ritical problem.

Neither have social and economic indicators shown any appreciable improvement. The economic situation appears to have worsened as about 50 per cent of the people live below poverty line. Some of the causes of worsening situation are traceable to debt burden and rapid population growth rate. In order to address these problems, government has set up an

advisory body, the National Consultative Group on Population and Development and other sub-committees on Information, Education and Communication (IEC) and Management Information System (MIS).

NGOs are being encouraged through donor agencies especially UNFPA, to develop and implement programmes aimed at improving access to reproductive health care services at all levels. Efforts are being put by government to maintain the stock of required contraceptives by committing more funds to this programme.

In spite of the travail experienced, Nigeria has crafted a vision (Vision 2010) which includes social target indicators for the year 2005 of reduction of infant and child mortality rates to 40 per 1000 and 58 per 1000 respectively as well as increasing life expectancy to 58 years. The country is set to reduce adult illiteracy rate to 21 per cent and increase the per capital income rate to USD823 by 2005. Also, Government is set not only to revise the National Population Policy to fully reflect the agreements reached at ICPD but also to undertake strategic planning for the implementation of the Programme of Action and with the assistance of UNFPA and the World Bank to integrate population concerns into development strategies and plans.

Some progress have been made towards gender equity and empowerment of women as a Ministry of Women Affairs and

Social Welfare has been established at the national level and similar departments have been created at state level to ensure the implementation of the women empowerment programme. A draft policy on gender equity and women empowerment is currently under discussion. Government has sustained the Family Support Programme (FSP) and introduced Family Economic Advancement Programme (FEAP) designed to provide micro credit to women to ensure their economic upliftment.

Although we have fully integrated reproductive rights and reproductive health-care into our Nation's Primary Health care delivery system, which encourages Community participation in the planning and provision of services, there are still some challenges to overcome. Some of the important challenges are related to improving access to reproductive health-care and family planning beyond the confines of the health system, involvement of the civil society including the NGOs and the commercial sectors in programme implementation in systematic way and removal of cultural, social, religious and legal barriers to reproductive health-care practices.

The pandemic of HIV/AIDS has manifested itself in the country after a delay of almost ten years. Efforts have been made to step up preventive measures and integrate same with family planning and other health-care interventions. Special

attention is being paid to adolescent and male reproductive health-care while effort is being made to integrate reproductive health and family planning into traditional health practices.

Mr. President, funding has been the greatest constraint in the implementation of the Programme of Action and in the realization of its objectives. with the yolk of debt burden, falling commodity prices in the world market and uncertainties in the price of crude oil, the major foreign exchange earner of the country, it has been difficult to fund the Programme of Action reasonably well. The threat of poverty has left the common man with little or no disposable income to spend on maintaining reproductive health. But more importantly, the international community has not kept to their undertaking entered into at ICPD. Technical assistance from the international community has been declining steadily rather than increasing.

Your Excellencies, distinguished ladies and gentlemen, in view of the fact that we are meeting during the last year of this century, we must pledge and rededicate ourselves to face the challenges of implementation of the Programme of Action in the new millenium. We have to redefine our priorities in view of dwindling or limited resources. Reducing fertility rate appears to be critical to reducing maternal mortality rate, achieving safe-motherhood and improving child survival. Also, fertility reduction is very closely related to poverty alleviation and integrating population needs to development strategies and planning. In view of the social, economic and health impact

of the pandemic of HIV/AIDS, its prevention must be accorded high priority if we are to survive in the new millenium.

Finally, Mr. President, in our view, this meeting shall be a success if we are able to agree on guidelines and approaches on priorities in the implementation of the Programme of Action to ensure that our resources match our success.

Thank You