

The Cairo Conference reflected in Finnish Development Policy

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Dear friends and colleagues,

it is a pleasure for me to be here today and take part in the discussion on sexual health and rights. I will approach this theme with a view on how the United Nations International Conference on Population and Development (ICPD) - so-called Cairo Conference - is reflected in Finland's Development Policy today.

This year marks the 15th anniversary of this historic conference held in Cairo, Egypt in 1994. It has been said that the Cairo Conference shifted population debate away from a top-down approach focusing on human numbers to a bottom-up approach focusing on human rights and essential needs of each individual. The focus shifted also from mere family planning towards reproductive rights and services, which are needed in order to assist each person in the right to decide the number and timing of her/his children and to attain the highest standard of sexual and reproductive health.

Although the Cairo Conference can be considered as a turning point in population thinking, it was already clear at the time that population growth was no longer the threat it had been before. Today the global population growth rate is estimated to be even lower – at 1.2 % annually – and it continues to decline. This decline is mainly the result of rapidly decreasing fertility in Asia and Latin America.

Why do we then again speak about population growth and the need to limit fertility and find it necessary to do so?

It is because population growth has direct links to poverty eradication and development targets such as the Millennium Development Goals (MDGs), approved by most countries as the guidelines for global and national development by 2015. Population growth and people's sexual and reproductive health and rights are crucial elements also when we talk about sustainable development.

Population growth, associated with unsustainable production and consumption patterns, threatens the carrying capacity of the earth. It is clear that fighting poverty

and meeting the MDGs is more difficult when population grows rapidly. Many features of poverty, such as lack of information, low status of women, high infant mortality, low level of education, poor health services, and lack of social protection, tend to maintain high birth rates. The negative effects of population growth can be seen particularly in Sub-Saharan Africa, for example, in countries such as Ethiopia and Tanzania. In these countries the increase in Gross National Income (GNI) gets consumed by population growth and as a result the per capita income remains low.

Poverty and hunger are also closely linked. Globally, population growth is a major determinant of the demand for food. Poor households allocate higher proportion of their income to food and are affected more seriously by rising food prices. In other words, rising food prices have thus more serious effects on those developing countries whose populations grow rapidly. The quick urbanization poses additional demands on service provision for the population.

Why is the Cairo Agenda so important?

At the Cairo Conference, countries agreed that empowering individual women and men through education, equal opportunities and means to decide the number and spacing of their children, were critical to enhancing human development. Lowering unwanted fertility will reduce maternal and child mortality and the number of abortions; and it also promotes gender equality and helps to reduce poverty.

Reduction of maternal mortality is, in fact, the target where the developing countries most likely fail by 2015, and yet it also one most crucial when we speak about reproductive health. If unplanned and unwanted pregnancies were prevented, one third of maternal deaths could be eliminated.

The Cairo Programme of Action sets a broad agenda for the improvement of the status of women. Furthermore, the importance of men's shared responsibility and active involvement in responsible parenthood is stressed. Access to reproductive health services is also crucial especially to young women and men. The largest generation of adolescents ever is now entering sexual and reproductive life. They need adequate and youth-friendly information, services and commodities.

The Cairo Programme of Action was also one of the first internationally agreed documents calling for concerted efforts to prevent the HIV/AIDS epidemic. The key

action today is to emphasise the synergies between HIV prevention and sexual and reproductive health and rights.

How is the Cairo Conference reflected in Finland's development policy?

Finland, among other European Union countries, has always been a strong supporter of the Cairo Programme of Action, advocating its goals in the international arena and in its own development policy.

The key principles of Finland's Development Policy are the commitment to the values and goals expressed in the UN Millennium Declaration. The main goal is to eradicate poverty and to promote socially, ecologically and economically sustainable development in accordance with the Millennium Development Goals.

Finland endorses United Nation's role as the central actor in international development policy. Finland also supports strengthening of the global role of the European Union. In fact, we have been active in EU's discussions on population issues and sexual and reproductive health issues and our view is that these themes must be kept high on the EU agenda.

The Cairo Programme of Action is one of the most important frameworks for the Finland's development cooperation of health and population sector. Finland has taken an integrated approach which promotes and combines both the MDGs and the ICPD targets. The Cairo Programme of Action is for us a concrete programme on how to implement the concerning MDGs. For example, the reduction in maternal mortality cannot be achieved without accessible reproductive health services.

We recognize that it is our duty to continue promoting the implementation of the Programme of Action and the goals of the ICPD, and also commitments that were reiterated in the UN Summit in September 2005. Keeping the commitments in sexual and reproductive health and rights is essential if we want to achieve the MDGs. An integrated and co-ordinated approach will promote both sets of these goals.

In terms of funding, Finland's funding for sexual and reproductive health activities has increased for multilateral organisations, including UNFPA, UNAIDS and WHO. Finland is also channelling development aid to partner countries through multilateral and international organisations, such as UNFPA in Nicaragua and Central Asia and Marie Stopes International in Afghanistan. Funding of NGO

programmes/projects - also on reproductive health - has increased. In addition to these systems, a fair amount of Finnish support for health sector goes through the European Union and the World Bank and through direct budget support in our partner countries. All in all, we can say that health sector received about 12 % of our Official Development Assistance (ODA) in 2008.

Finally, as we all can see, the world is facing presently the most serious economic crisis for many years. This crisis affects poorer countries' health systems, endangering the access of people to health services, particularly of the poor and vulnerable people. There is a huge funding gap in most developing countries concerning those actions that are needed to achieve the health-related MDGs. Strengthening of health systems in order to meet the demands of the population for basic services and meeting the funding needs for modern contraceptives are the issues that the donors - as well as the developing countries themselves - now need to prioritise, even at the time of economic crisis.

The visionary Cairo agenda – focusing on population, poverty, health, education, gender, HIV & AIDS, and environment – is now more relevant than ever. We all - meaning governments, multilateral organisations, funds and foundations, private sector, non-governmental organisations, etc - need to keep our commitments and support this agenda . In that way we can increase our investments in women and men, and especially the young people, and their right for meaningful and healthy life.

Thank you.