President Abdoulaye Wade,

Excellencies,

Ladies and gentlemen,

When the Secretary-General of the United Nations, Mr. Ban Ki-moon, addressed the General Assembly two months ago, he had a clear message:

He stated that “sustainable development is the imperative of the 21st century.”

He stated that, “we must invest in people — particularly in education and women’s and children’s health.”

And he stated that “development is not sustainable unless it is equitable and serves all people.”

I couldn’t agree with him more.

This conference in Dakar is officially about family planning. But it’s also about a larger effort to improve women’s and children’s health. It’s about Every Woman, Every Child. It is about accelerating social and economic progress. And it’s about a new path to sustainable development.

Family planning programmes not only save and improve the lives of women and children; they empower people, strengthen health systems, and reduce poverty.

Voluntary family planning allows women and couples to determine the number, timing, and spacing of their children. It is – and has to be - an essential part of integrated reproductive and maternal health programs, because wanted pregnancies are healthier pregnancies.

Family planning can save lives. It is estimated that as high as one third of maternal deaths could be prevented if unmet need for family planning were to be eliminated.
Family planning is cost-effective. It empowers men and women to improve the health of their families and communities. It can provide young people with the ability to delay childbearing, helping them to achieve their full potential as economically active adults.

Family planning can help reduce poverty and contribute to economic development for families, communities, and nations.

We all know the benefits.

Yet, 215 million women who want to avoid or delay pregnancy still have no access to modern contraception, with life-threatening consequences.

Satisfying the unmet need for family planning in developing countries is essential to upholding women’s reproductive rights.

Increasing access to voluntary family planning could prevent up to 1 in 3 maternal deaths and 1 in 11 child deaths. This is critical to achieving all the Millennium Development Goals, especially 4 and 5. Every year, 358,000 women die from pregnancy-related complications.

Fulfilling the unmet need for modern family planning in developing countries would cost $3.6 billion, but this investment would actually lower the cost of providing maternal and newborn health services by $5.1 billion, resulting in a net total savings of $1.5 billion.

As our numbers keep growing past 7 billion, and so many suffer from poverty, poor health and lack of opportunities, it is more important than ever to ensure that every child is wanted and that everyone has the power and the right to manage their own fertility.

And we know what needs to be done.

We have family planning solutions. Modern family planning technologies and programs are one of the most powerful tools in combating maternal and infant mortality worldwide. We must rapidly and effectively make voluntary family planning services available to all men and women who need them.

UNFPA is fully committed to this.
Options are essential. Family planning works best when women have a full range of contraceptive options and can choose, access, and afford the method best suited to their needs. New contraceptive technologies in development can potentially help increase access, reduce costs, and offer new choices for women.

However, the options we already have should get out there. This means getting the right contraceptives, to the right people, in the right quality and quantity, at the right time.

We want to reach the poorest of the poor – urban and rural. There is value in community-based workers. Frontline health workers are trusted by their communities and require minimal training. While not a substitute for a strong health system, these health workers can help fill the gap in family planning services by providing counseling, health education, and access to contraceptives at the local level.

Moreover, today we have the largest cohort of young people the world has ever seen. We need to serve the reproductive health needs of these young people. We need to design programmes that reach young people in their own terms and serve their specific needs.

Education yields empowerment and enormous benefits. Cultural barriers and low awareness restrict many women and men from accessing family planning. When people have the knowledge they need around family planning, they can make the best decisions for themselves and their families.

Excellencies,

Ladies and gentlemen,

Now is a critical time to support family planning and emphasize universal access to reproductive health.

To meet the global demand for family planning, we must galvanize greater political and financial support. We must hold governments accountable for their commitments, and champion innovation and access – both in the North and in the South. Investing in voluntary family planning today will not
only pay dividends now, but will also help history’s largest generation of young people enjoy opportunities and forge a brighter future.

Commitments need to turn from words to action. There are encouraging trends in funding and the remaining gaps must be closed, not only by international aid donors but also by countries themselves. Family planning is too critical to allow it to be treated as an add-on that is vulnerable to cuts every time donor support or country budgets ebbs.

We need to make sure that family planning programmes are tailored to address young people’s needs.

We need to focus our effort on the underserved, the poorest of the poor.

And, perhaps most importantly, we must ensure equity and integration. We must reach out to the most marginalized. And we must ensure that family planning should be integrated into the broader strengthening of health systems, including maternal and child health and HIV/AIDS services, to increase efficiency and access, to reduce costs, and to deliver for all women.

Health systems that deliver for women and children deliver for everyone.

Family planning programs must be nationally designed and owned. Each country has its own unique set of circumstances and cultural considerations that cannot and should not be addressed by outsiders.

The unmet need for voluntary family planning remains appallingly high. When a lack of access to contraceptives and information about their use lead to unwanted pregnancies, reproductive rights have been violated. Governments have the primary responsibility for protecting their citizens’ reproductive rights. But donor governments also have a responsibility to help uphold these rights.

The gap between the unmet need for family planning and the amount of money available for it must be bridged, starting with those in those in most need—the rural and urban poor, and also young people, upon whom our future rests.

A couple weeks ago, I had the privilege to travel to Bangladesh with the Secretary-General. As most of you know, that country has made great
progress in increasing access to voluntary family planning, with the added benefits of higher wages for women, higher child survival rates, and even higher enrollments of girls in school.

What happened in Bangladesh is just one illustration of how investments in voluntary family planning, when offered in a culturally sensitive way, can yield returns that extend far beyond the individual, benefitting communities, economies and nations.

Sustainable development is the imperative of the 21st century. We must invest in people. These are powerful messages. We know the benefits, and we know what needs to be done. Now it’s time to redouble our efforts and deliver on our joint commitments.

Thank you.