

## The State of the Region's Children Progress within the Region and Future Development Priorities

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### STATEMENT BY

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Mr. Chairman,

Distinguished delegates,

Colleagues and friends,

Good morning and selamat pagi.

### Progress within the Region

From the arid mountains of Afghanistan to the frigid upper reaches of Mongolia and the rapidly developing metropolis of Malaysia, this region has achieved impressive development amidst great cultural, political and geographical diversity.

Since 1990, the region has witnessed the fastest economic growth in the world. But we cannot measure progress by economic growth alone.

UNICEF is concerned with regional realities of child survival and the prospects for meeting the Millennium Development Goals – particularly the 4<sup>th</sup> Goal of reducing child mortality – by the year 2015.

I am pleased to share with you that child survival in the region has improved, thanks to political will, commitment and effective partnerships.

#### **In poverty, as the starting point for all other social indicators:**

- Poverty reduction has been the region's greatest success. Between 1990 and 2004, the region freed more than 350 million people from extreme poverty, meaning those living on less than US\$1 a day.

#### **In child survival:**

- More children in the Asia-Pacific region today survive beyond the age of 5.
- Between 1990 and 2006, the region has experienced a steady decrease in its annual number of under-5 deaths – from 6.7 million to 4 million.

- This achievement is largely due to the massive reduction of child deaths in South Asia, Eastern Asia and South-East Asia. India reduced their number of under-5 deaths by 60%, while China reduced their number by 80%.
- Here in Malaysia, I can also quote significant achievements: the under-5 mortality rate measured in year 2006 was only 12 per 1000 live births.

**In maternal health:**

- Countries in the region have made efforts to improve maternal health services, by providing emergency obstetric care, as well as skilled attendants during pregnancy, at birth and during the postnatal period.
- These are some of the critical health services that are needed to improve the survival and health of women and children. However, challenges lie ahead for other areas of improving maternal health and nutrition, as I shall explain later.

**In education:**

- Education has been a priority for most Asia-Pacific countries, and this has translated into benefits for millions of school-age children. Almost all countries have net primary enrolment ratios above 90%, with some countries approaching 100%.
- Again, I take the example of Malaysia, which had more than 96% of primary-age children enrolled in school in 2005, with no significant gender disparities.

Ladies and gentlemen,

## Challenges for the Region

I have briefly described what the region has attained in helping children survive and thrive. This shows that many countries are on track to meet the 4<sup>th</sup> Millennium Development Goal at the national level.

However, our greatest worry now is whether certain groups or communities will be left behind. The rapid economic growth in the region has created disparities between the rich and poor, urban and rural, male and female.

Pockets of poverty and marginalisation, within countries and across sub-regional borders, are leaving vast numbers of mothers and children at risk of increasing relative poverty and continued exclusion from quality primary healthcare services.

Let me share with you some of the challenges that the region faces:

**In child health and survival:**

- We should be extremely concerned with child mortality, because 15 countries have been found to be off-track in achieving the goal of reducing child mortality, and several countries have even regressed.
- 4 million children in the region will die each year before reaching the age of 5.
- Many factors tie in to child health – neonatal, infant and child mortality rates; access to clean water and basic sanitation; nutritional status of mothers and infants; and levels of immunisation.
- The region has a high burden of neonatal deaths, due to insufficient maternal healthcare services, maternal undernutrition and cultural practices surrounding the birth process and disease.
- Children born in the poorest 20% of households are much more likely to die of preventable diseases than children in the wealthiest 20%.
- Key causes of child deaths also include pneumonia, diarrhoeal diseases and measles. Preventive measures and treatments for these diseases are still lacking across the region.
- Around 97 million children will remain underweight, accounting for around two-thirds of the world's underweight children.
- This region has some of the lowest rates of exclusive breastfeeding – this is unfortunate because immediate and exclusive breastfeeding is the best source of nutrition for infants.
- In countries where gender discrimination exists, such as in South Asia, women and girls have lower nutritional status and do not have access to primary health services and education.
- Increasing numbers of children now live in peri-urban communities, slums which do not receive enough safe drinking water, basic sanitation, or health services.

**In education**

- Although the region has achieved high primary enrolment rates, the challenges now are to address the problems of children repeating classes or dropping out of school before reaching the final grade.
- These problems are greatest for children from vulnerable communities, such as those from poor households, rural and remote areas, or indigenous communities.
- The families of these children may keep them at home or withdraw them from school for a number of reasons: they see no long-term benefits of education (especially for girls); they want their children to work; they cannot afford the high costs of school materials and transportation; or they want their daughters to marry at a young age.
- Gender inequality in education is a concern. High discrimination in primary education leads to lower literacy rates for girls as well as low enrolment in secondary and tertiary education. In Afghanistan, for example, 47% fewer girls enrol in primary school than boys; and in Pakistan, that proportion is 29%.
- Women who are literate and educated can put into motion an entire cycle of reforms: ultimately resulting in reduced poverty and hunger, improved child and maternal health, better literacy rates and increased capacity in the region.

**In protection against violence and other forms of discrimination:**

- Violence against children is a deep, dark shadow for this region.
- Little is known about how many children are victims of violence and other forms of discrimination – whether in homes, schools, institutions of care, the community, in work situations, in cyberspace, or against children in conflict with the law.
- Our biggest stumbling block is the lack of comprehensive and systematic systems for data collection, reporting and monitoring of violence against children. The lack of data makes it near-impossible for us to address fundamental attitudes in society, as well as review the national legal frameworks that exist to protect children against violence.
- It is widely agreed that violence against children by family members results in deaths far more often than official records suggest.
- Forced marriage and early pregnancy are also forms of violence and discrimination that affect child survival. Early marriage deprives girls of education, and threatens their health. When girls give birth before their bodies are fully developed, there is a much higher risk of death for both mother and child. Pregnant girls between the ages of 15 and 19 are five times more likely to die in childbirth than those in their twenties.
- Another critical form of protection is the registration of all children at birth. Legal acknowledgement of a child's existence is required for that child to access essential health services and education. Yet in 2006, there were 22.6 million unregistered births in South Asia and 5.1 million in the rest of Asia-Pacific.
- Children are the most vulnerable groups in states that suffer conflict, civil unrest or political instability. In countries where these have occurred, such as Afghanistan and Myanmar, the rates of child deaths are very high.
- Children are also the biggest victims in natural disasters, not only as a direct result of the calamity, but also as a result of food insecurity, which leads to undernutrition.

The challenges I have just described should not be underestimated. If we do not meet the 4<sup>th</sup> Millennium Development Goal by 2015, one million children in Asia-Pacific will die in that year.

Ladies and Gentlemen,

**The Way Forward: Future Development Priorities**

What is the way forward for the Asia-Pacific region? We should not take recent achievements for granted, nor should we be discouraged by the challenges ahead.

We should keep our eyes firmly on our ultimate goal, which is to ensure that every child survives and thrives throughout childhood. In line with this, we must tackle discrimination against women and vulnerable children, and empower them to become agents of their own development.

The way ahead is, of course, to continue sustaining the gains in child health. At the same time, we must identify the essential services that underpin our achievements, and ensure that these services are extended to the most impoverished, isolated, uneducated and marginalised districts and provinces.

We must also effectively scale up these services and strengthen integrated approaches to child health at the community level.

I cannot emphasise enough the importance of equity, political will and community partnerships, which are consciously harnessed to improve children's lives. Certainly, the primary responsibility for laying the road map towards the Millennium Development Goals lies with national governments and organisations.

But they need not work in isolation. Governments can join forces with international organisations, such as UN agencies and funds – including UNICEF – in regional partnerships to share knowledge, encourage youth participation, build capacity, mobilise financial resources and monitor progress.

Together, we have to reinforce South-South cooperation to share good practices and lessons learnt.

We have to reinforce actions underway to address the looming food crisis.

We need to impose a moratorium on internal conflicts and construct better political stability as *sine qua non* conditions for spearheading development.

We need to identify gaps in policies through evidence-based studies to address the phenomena of rapid urbanisation and slums. We need to understand the attraction of urbanisation, and instead of people coming to development, let's take development to the rural poor.

We only have 7 years to attain the target date of 2015. If the region works "As One" – governments, international organisations, regional organisations such as the Colombo Plan, regional development banks, bilateral donors and youth organisations – we can create that grand alliance necessary to respond more effectively through an accelerated strategy.

And we can make it. As Malaysians say, Malaysia BOLEH. Similarly, this region BOLEH.

Thank you.