Statement by Mr. James Jennings, Executive Officer of the Inter-Parliamentary Union

Mr. President,
Distinguished Ministers,
Excellencies,
Ladies and Gentlemen,

I will concentrate my remarks on questions relating to public health, and in particular HIV and AIDS, and maternal and child mortality. Before that however, a word on the global economic crisis. As many speakers have commented, the recent upheavals are threatening years of development gains, and one of the reasons for this is the increasing likelihood of a drop in public health investments.

For the IPU, this poses a challenge. Sick and undernourished people do not place democracy high on their agenda. Daily survival is enough to think about. And without the backing of the public, democracy will become increasingly frail.

The crisis affects women and men differently, with women hit the hardest. It will consolidate and probably exacerbate inequalities, pushing women even further into poverty. In the field of HIV, it increases the likelihood of hazardous behaviour. For pregnant mothers, it means less chance of safe deliveries. For the IPU these are not just social issues. They are primarily political questions.

The IPU tackles discrimination, especially where it is to be found in the letter of the law. For example, when discriminatory practices limit women’s access to health by requiring a married woman to obtain her husband’s consent to receive care, then legislation should be amended or repealed.

In the HIV/AIDS field, the IPU is pushing for more forthright parliamentary leadership in dealing with the epidemic. Often this means taking a courageous stand before an electorate that may have mixed views on how to tackle the virus. As leading spokespersons in society, parliamentarians must also stand up and speak out for groups that are hit the hardest by prejudice, discrimination, and ignorance.

More widespread access to antiretroviral therapy is an obvious need. But parliamentarians need to know more about the production of pharmaceuticals and the multilateral intellectual property regime. A deeper understanding of intellectual property rights can lead to lives being saved through appropriate intellectual property legislation. That is why the IPU has been running a series of regional parliamentary seminars on the subject.
Another issue being addressed by the IPU is the fact that an alarming number of legislatures are making it a criminal offence to transmit the virus under certain conditions. Parliamentarians have made it clear that before rushing to legislate they should give careful consideration to the fact that passing HIV-specific criminal legislation can further stigmatize persons living with HIV, provide a disincentive to testing, and create a false sense of security among people who are HIV-negative.

On the question of maternal and child mortality, we know that ninety-seven per cent of all maternal and child deaths occur in 68 countries in the world. Only 16 of these countries are on track to reach MDG 4 on child survival. Progress is slow.

Parliamentarians also know that health systems have long suffered from marginalization from national development policies. There can be no progress without a searching examination of national health systems, addressing their weaknesses and responding to their needs. The need for more funding is acute. Parliaments hold the purse strings, and they can do more to direct the money where it is needed, applying tools such as gender sensitive budgeting.

In 2008, the Inter-Parliamentary Union and the Countdown to 2015 Conference on Maternal, Newborn and Child Survival joined forces to step up parliamentary efforts to promote maternal, newborn and child health within the 68 priority countries. Since then the IPU has continued to support parliaments in overseeing government action, running training workshops and seminars for members of parliament, disseminating information and backing national initiatives.

There are some encouraging signs. The Parliament of Zambia has set up a Parliamentary Caucus on Children to oversee government action in meeting its commitments on MDGs 4 and 5. The parliaments of Canada and Italy have both recently passed resolutions expressing strong commitment to achieving MDGs 4 and 5. In Canada, an all-party resolution was carried renewing Canada’s commitment to reducing maternal and newborn mortality both at home and abroad. In Italy, the resolution adopted by the Senate seeks to increase Italian official development assistance for maternal, newborn and child health.

In times of financial crisis, such political commitments deliver strong messages in terms of international and national priorities. And they should be heeded. The parliaments of the world should not sit idly by if donor governments cut their aid budgets. At a recent IPU conference on the crisis here in Geneva, they called on them to live up to the pledges they made at Monterrey and Gleneagles, and more recently in London. The best kind of support that parliaments can provide to their governments is stringent oversight.

The health of the world economy, they added, can not be measured as a function of stock market recovery. Today some have seen some modest signs of financial and economic recovery, but this is no reason for complacency. We should not be fooled by these signs. Throughout the world, society and the values that underpin it is in need of radical reform. This is the agenda for the IPU, and we will continue to engage parliaments everywhere on the issue. We will foster more debate and greater awareness to muster public and political support for fundamental change.

Contrary to the belief of many, the crisis is reversible. It is an opportunity to achieve progress, righting social ills and building new systems based on inclusion, transparency and good governance. As the elected leaders of their communities the IPU Members intend to use their role to sustain the public support that this will require.

Thank you.