



Mme. President,  
Excellencies,  
Civil society colleagues,  
Ladies and gentlemen,

1. Thank you for allowing CoNGO—the Conference of Non-Governmental Organizations in Consultative Relationship with the United Nations—to present the salient points of the Outcome Document of its recently-concluded Civil Society Development Forum (CSDF), held in Geneva from 2 to 4 July 2009. With this statement I also wish to submit to you the full text of our Outcome Document. Please receive it as our contribution to the fulfillment of your agenda.
2. Mme. President, close to 150 NGO leaders from all of the regions of the world gathered for the CSDF at a time when the worldwide food, energy and environmental crises were reinforced by the devastating effects of the financial and economic crises. The appalling mix of pandemic diseases and endemic hunger and poverty in the world today are not only potent but are a debilitating mix. These crises have now scaled back many of the gains since the MDGs were launched. It behoves us to take heed of the conclusions and recommendations of the UN Conference on the World Financial and Economic Crisis and Its Impact on Development just held in June 2009 in New York. These conclusions reminded all States and international financial institutions to ensure promotion of the social and economic rights of the most vulnerable, including their right to health. It is of top priority for governments to live up to and entirely fulfil the promises they have made to their citizens. Social justice demands no less. The credibility of governmental institutions demands no less.
3. Our advocacy for the MDGs comes with the belief that, when achieved, the goals redound to the betterment of life and living conditions of people around the world. In the economic downturn, we must not renege on ensuring peoples' health and the health of the entire human community, but especially the health of those suffering from abject poverty and hunger. These people are also the most deprived, oppressed and marginalized. We say this emphasizing our belief that human rights, peace and security, and sustainable development are, sine qua non, linked by an irrefutable nexus.
4. Governments and all stakeholders must adopt a human rights-based approach to health. This approach redefines health beyond being a mere state of physical, mental and social well-being, but also as a potential for people to deal with challenges to their bodies and lives, and to the social determinants of their health. Health is a potential to become fully human and humane. Health care must be affordable, acceptable, accessible, and adaptable. It must also be socially responsive, policy-based, contextually-appropriate, and gender-sensitive.

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5. There must be a responsible and equitable distribution of health care workers, emanating from a just and rational set of policies, including migration and employment policies, to reduce the brain drain in many of the developing countries. We must educate, train and deploy local people to provide services that are compatible with their community needs. Education and training must be inclusive for all levels of health care, and must be for all health care workers, from community workers and managers to social workers, psychologists, psychiatrists, nurses, indigenous medical practitioners and medical doctors. Decent wages and working conditions are keys to ensuring the retention of health workers.

Mme. President, Excellencies,

6. Health financing by governments should go beyond financing health care systems but must include investing in the preconditions of health. Financing health should not be seen as an economic burden but an investment in people contributing to sustainable development and gross national product. National budget allocations should not only cover curative services and the recurrent costs of health facilities and services but resources should also be deployed for prevention, promotion and rehabilitation.
7. The advance of non-communicable and chronic diseases must be stemmed by helping remove unhealthy life conditions and lifestyles. Conditions such as health illiteracy and toxic environments, and harmful lifestyles such as inadequate nutrition, drug abuse, alcoholism and other dependencies, need to be abandoned. Effective global action is direly needed.
8. Health policies that take into account the particular realities in each country, including the recognition and respect for ancestral indigenous people's medicine is important, the CSDF said. The holistic approach of indigenous medicine complements western medicine and needs to be included when shaping national health policy and practice.
9. Women's health, including reproductive health, must be promoted throughout their life cycle. Healthy mothers and healthy babies make for healthy societies. Continuing and expanding financial and political support for MDG 5 is critical. And we must break out of the scandalous lack of progress on this goal. Investing in maternal and child health is a precondition for the health of families, communities and nations and not only the health of half of humanity.
10. Governments and intergovernmental agencies must broaden the concept of HIV/AIDS prevention and address the social determinants of health regarding vulnerable populations, including women and people who live in abject poverty and hunger. The financial crisis cannot be an excuse to stop funding HIV/AIDS programmes and those of malaria and tuberculosis. We must scale up even more so our advocacy and response.

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11. Health-related issues have major and often detrimental impact upon young persons, and yet these persons have little or no voice on these issues. Young people must have a voice in the way their health and health systems are managed. It is crucial that the youth can feel a sense of purpose and respect.
12. The concern against poverty is also the concern against hunger. Food, an essential element of health, must be ensured for all. Without food, health and development goals are meaningless. Profit entities and structures, especially those affecting the food production and distribution chain, must favour and ensure availability of safe, healthy and affordable food for all. No one should gain and make profit from making people sick.
13. Global public health is a challenge to socio-economic policies. Health is not primarily an economic outlay but the foundation for productivity and the enjoyment of human rights and dignity. Public health cannot be a mere consumer good for it is a fundamental building block of society. The right to and equal access to health care implies a just and equitable health for vulnerable populations.
14. In conclusion, the CSDF asserted strongly in its Outcome Document that meeting the full range of health needs of populations and communities requires partnership. Civil society is ready and able to participate at all levels, national, regional and international, and it has considerable degrees of expertise and competencies that are health-related and which can be harnessed.

Mme. President, Excellencies,

Thank you for giving these summary points of the Civil Society Development Forum your deserved hearing and its full Outcome Document your kind perusal and support in your deliberations.

Be assured of my best wishes for the conduct and conclusion of your work.